W.A. Waldron

165th
Annual Report
# of the Trustees

*

MASSACHUSETTS GENERAL HOSPITAL
1978
OFFICERS AND STAFF
1979

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THE GENERAL HOSPITAL
Boston, Massachusetts
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McLEAN HOSPITAL
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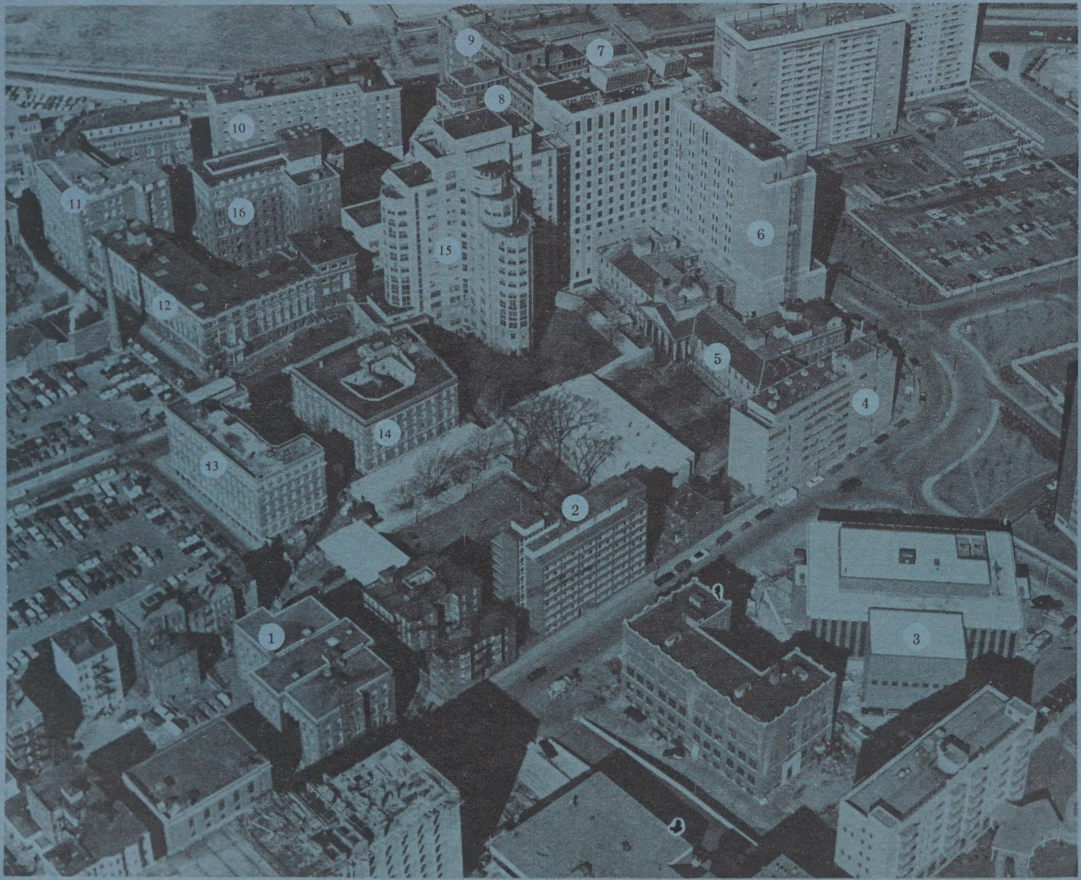

THE MASSACHUSETTS GENERAL HOSPITAL

1. Sleeper Hall.
2. Bartlett Hall Nurses Residence (1954)
3. Shriners Burns Institute, staffed by MGH doctors
4. Edwards Memorial Research Building (1951)
5. Bulfinch Building (1821)
6. Gray Building, Jackson Tower and Bigelow Tower (1969)
7. Cox Center (1975)
8. Baker Memorial (1930)
9. Warren Building (1956)
10. Phillips House (1917)
11. Massachusetts Eye and Ear Infirmary, affiliated with the MGH
12. Ambulatory Care Division (1903)
13. Walcott House (1913)
14. Moseley Building (1916)
15. George Robert White Building (1939)
16. Vincent Memorial Hospital and Burnham Memorial for Children (1949)

One Hundred and Sixty-Fifth Annual Report of the Trustees

of

THE MASSACHUSETTS GENERAL HOSPITAL

INCLUDING THE GENERAL HOSPITAL IN BOSTON

AND

McLEAN HOSPITAL IN BELMONT

1978

OFFICERS AND STAFF

1979

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BOSTON, MASSACHUSETTS

General Information

The Massachusetts General Hospital is a private nonprofit institution incorporated by special act of the General Court of the Commonwealth in 1811. The Corporation includes **The Massachusetts General Hospital, McLean Hospital**, and **The Massachusetts General Hospital Education Division. The General Hospital** includes the **Baker Memorial**, the **Burnham Memorial for Children, Phillips House**, and the **John Collins Warren Laboratories** of the Huntington Memorial Hospital of Harvard University. Entrances to The General Hospital are on Fruit Street at the end of North Grove Street, on Blossom Street, and on Charles Street in Boston. **McLean Hospital**, in Belmont, Massachusetts, is a psychiatric hospital. **Vincent Memorial Hospital** is a separate institution staffed and managed by the Gynecological Service of The General Hospital.

Other Facilities

The Emergency Ward, located at the Fruit Street entrance of The General Hospital, is open 24 hours a day.

The Ambulatory Care Division is available to patients, without regard to financial status, during daytime hours. Appointments may be made by mail, telephone, or personal application at the Clinics Admitting Desk (entrance off Fruit Street).

Logan Airport Medical Station is an extension of The General Hospital serving passengers, employees, and visitors at the airport.

MGH-Bunker Hill Health Center, located on High Street in Charlestown, is a facility of The General Hospital devoted to the medical care of Charlestown residents.

MGH-Chelsea Health Center, a similar facility located at 111 Bellingham Street in Chelsea, provides care to the residents of Chelsea and neighboring communities.

The General Hospital is affiliated with the Massachusetts Eye and Ear Infirmary and the Shriners Hospitals for Crippled Children, Burns Institute, Boston Unit.

The Massachusetts General Hospital is

- — A member of the American Hospital Association and the Massachusetts Hospital Association
- — Accredited by the Joint Commission on Accreditation of Hospitals of the United States and Canada
- — Approved for residency training by The American Medical Association

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(Operating Room)
Catherine Breen, R.N.
(Baker Memorial)
Patricia A. Regan, R.N. Ed.D.
(Neuromedical-surgical Units)

Anne M. Sheetz, R.N.
(Burnham)
Frances A. Gardella, R.N.
(Bulfinch)
Mary E. Quinlan, R.N.
(Vincent-White)
Elizabeth Heckathorn, R.N.
(Intensive Care Units)

Cheryl B. Stetler, R.N. Ph.D.
(Staff Education)

SCHOOL OF NURSING

Director
Natalie Petzold, R.N.

DIRECTORS OF DEPARTMENTS

Accounting
Harold L. Emrich
(Comptroller)

Admitting Service:
Maryanne Spicer

Building Service:
Daniel E. Tanguy

Clinical Administration:
John C. Cronin

Dietary Department and
Dietetic Internship:
Louise Hatch, R.D.

Medical Records:
Joyce E. Gormley

Personnel:
Douglas H. Geister

Pharmacy:
John W. Webb

Purchasing:
Thomas W. Kelly

Security:
Thomas F. Sullivan

Maintenance and Engineering: William L. Clemons	*Social Service:* Eleanor Clark
Materials Distribution: Michael J. Abruzzese	*Volunteer:* Maeve Blackman

UNIT DIRECTORS

Dispatch	Harvey L. Simons
Information Desks	Irving Bacon
Manufacturing and Inventories	James Willis
Medical Art	Edith Tagrin
Orthopaedic Workshop	John Snowden
Print Shop and Copy Center	Ralph H. Cluff, Jr.
Receiving and Distribution	Paul Kayne
Telecommunications	Evelyn Olschewski
Treadwell Library	Jacqueline Bastille
Transportation Services	Jason Savage

MEDICAL DIVISION

GENERAL MEDICINE

Chief of Medical Services
Alexander Leaf, M.D.

Honorary Physicians

F. Dennette Adams, M.D.
K. Frank Austen, M.D.
Theodore L. Badger, M.D.
Arlie V. Bock, M.D.
M. Henry Clifford, M.D.
Briant L. Decker, M.D.
Dana L. Farnsworth, M.D.
John R. Graham, M.D.
Harriet L. Hardy, M.D.
John H. Knowles, M.D.
Robert S. Palmer, M.D.
Helen S. Pittman, M.D.
Lot B. Page, M.D.
Mitchell T. Rabkin, M.D.
Marian W. Ropes, M.D.
John B. Stanbury, M.D.
James H. Townsend, M.D.
Louis Weinstein, M.D.

Senior Physicians

Myles P. Baker, M.D.
Edward F. Bland, M.D.
Earle M. Chapman, M.D.
Anne P. Forbes, M.D.
Bernard M. Jacobson, M.D.
Alfred Kranes, M.D.
Jacob Lerman, M.D.
Francis C. Lowell, M.D.
John T. Quinby, M.D.
Charles L. Short, M.D.
Conger Williams, M.D.

Physicians

George P. Baker, Jr., M.D.
William H. Baker, M.D.
Kurt J. Bloch, M.D.
Roman W. DeSanctis, M.D.
Daniel S. Ellis, M.D.
Daniel D. Federman, M.D.
Gerald S. Foster, M.D.
Allan L. Friedlich, M.D.
Stephen E. Goldfinger, M.D.
Edgar Haber, M.D.
Kurt J. Isselbacher, M.D.
Homayoun Kazemi, M.D.
Rita M. Kelley, M.D.
Stephen M. Krane, M.D.
Farahe Maloof, M.D.
Donald B. Martin, M.D.
Edwin P. Maynard, III, M.D.
John A. Mills, M.D.
Gordon S. Myers, M.D.
John T. Potts, Jr., M.D.
Walter T. St. Goar, M.D.
Charles A. Sanders, M.D.
Robert H. Schapiro, M.D.
John D. Stoeckle, M.D.
Morton N. Swartz, M.D.
Arnold N. Weinberg, M.D.
Edwin O. Wheeler, M.D.
Peter M. Yurchak, M.D.
Paul C. Zamecnik, M.D.

Associate Physicians

Alan C. Aisenberg, M.D.
Bernard R. Aserkoff, M.D.
G. Octo Barnett, M.D.
William S. Beck, M.D.
Kenneth T. Bird, M.D.
Paul H. Black, M.D.
Peter C. Block, M.D.
Robert W. Carey, M.D.
Cecil H. Coggins, M.D.
Perry J. Culver, M.D.
Adolph M. Hutter, Jr., M.D.
Newton E. Hyslop, M.D.
George A. Jacoby, M.D.
Adoph W. Karchmer, M.D.
Sheldon D. Kaufman, M.D.
Bernard Kliman, M.D.
Janet M. McArthur, M.D.
Robert C. Moellering, Jr., M.D.
Robert M. Neer, M.D.
Arthur S. Pier, Jr., M.D.

James J. Dineen, M.D.
Leonard L. Ellman, M.D.
William Franklin, M.D.
Anne F. Godley, M.D.
Jerome H. Grossman, M.D.
J. Warren Harthorne, M.D.
Cyrus C. Hopkins, M.D.
William J. Powell, M.D.
Dwight R. Robinson, M.D.
Nina E. Rubin, M.D.
Guillermo C. Sanchez, M.D.
Allan I. Sandler, M.D.
W. Davies Sohier, Jr., M.D.
Thomas P. Stossel, M.D.
Roger H. Sweet, M.D.

Assistant Physicians

M. Elliott Alpert, M.D.
Joseph Avruch, M.D.
Lloyd Axelrod, M.D.
Ann S. Baker, M.D.
Victor G. Balboni, M.D.
John C. Dalton, M.D.
Gilbert H. Daniels, M.D.
Richard W. Erbe, M.D.
Joseph W. Gardella, M.D.
Herman K. Gold, M.D.
Allan Goldblatt, M.D.
Peter L. Gross, M.D.
Timothy E. Guiney, M.D.
Joel Habener, M.D.
Charles A. Hales, M.D.
Martin S. Hirsch, M.D.
John W. Irwin, M.D.
Robert A. Johnson, M.D.
H. Walter Jones, M.D.
David J. Kanarek, M.D.
John W. Keller, M.D.
Robert C. Leinbach, M.D.
Barry W. Levine, M.D.
Norman S. Lichtenstein, M.D.
William F. McNeely, M.D.
Lawrence M. Miller, M.D.
Richard C. Pingree, M.D.
Edwin L. Prien, Jr., M.D.
Eli C. Ridgway, III, M.D.
Robert H. Rubin, M.D.
Gino V. Segre, M.D.
Harvey B. Simon, M.D.
John H. Sisson, M.D.
William E. Strole, Jr., M.D.
George E. Thibault, M.D.
Jack R. Wands, M.D.
Charles H. Weingarten, M.D.
Lee A. Witters, M.D.
Martin J. Wohl, M.D.

Assistants in Medicine

Dennis A. Ausiello, M.D.
Charles A. Boucher, M.D.
George L. Cohen, M.D.
William F. Crowley, Jr., M.D.
Zareh N. Demirjian, M.D.
Mark R. Goldman, M.D.
Allan H. Goroll, M.D.
David J. Greenblatt, M.D.
Lewis W. Kane, M.D.
Jeane N. Kelly, M.D.
Henry M. Kronenberg, M.D.
Robert S. Lees, M.D.
Robert K. Leet, M.D.
Steven R. Levisohn, M.D.
Richard Liberthson, M.D.
John L. Ohman, M.D.
Lanta C. Oliver, M.D.
Terrence A. O'Malley, M.D.
Maurice M. Pechet, M.D.
Gerald M. Pohost, M.D.
Richard N. Re, M.D.
Michael A. Rie, M.D.
Michael Rosenblatt, M.D.
Jeremy N. Ruskin, M.D.
Eve E. Slater, M.D.
Nancy L. Sprince, M.D.
Lawrence E. Wood, M.D.

Clinical Associates in Medicine

Doris E. Barber, M.D.
Wilfred N. Beaucher, M.D.
Caesar Briefer, M.D.
Elliott L. Cohen, M.D.
Herbert L. Cooper, M.D.
G. Timothy Johnson, M.D.
Robert E. Kahn, M.D.
Alan L. Kaitz, M.D.
Charles S. Keevil, M.D.
Allan Kliman, M.D.

Anthony M. DeMarco, M.D.
Gerald J. Doyle, M.D.
Robert A. Dye, M.D.
Peter A. Engel, M.D.
Jack E. Farnham, M.D.
Richard A. Field, M.D.
Martin Gelman, M.D.
Nicholas D. Gianturco, M.D.
Abraham Gold, M.D.
Isaac Golden, M.D.
Maury A. Goldman, M.D.
Stephen R. Goldring, M.D.
Jeffrey E. Harris, M.D.
Hamilton Hayes, M.D.
Edward P. Hoffer, M.D.
John Homans, Jr., M.D.
Michael Lawrence, M.D.
Robert S. Lawrence, M.D.
Manuel J. Lipson, M.D.
Joseph A. Martino, M.D.
James C. McFarland, M.D.
Gordon T. Moore, M.D.
Robert K. Osborne, M.D.
William N. Pachas, M.D.
Edward T. Parsons, M.D.
Sholem Postel, M.D.
Stanley J. Reiser, M.D.
Edward S. Rendall, M.D.
Oscar E. Starobin, M.D.
Charles M. Stearns, M.D.
Denise J. Strieder, M.D
Isaac M. Taylor, M.D.
Leonard M. Zir, M.D.

Clinical Assistants in Medicine

John A. Billings, M.D.
William W. Chin, M.D.
David S. Cooper, M.D.
Raymond J. Dattwyler, M.D.
Jules Dienstag, M.D.
Richard L. Goldstein, M.D.
John D. Goodson, M.D.
Michael F. Holick, M.D.
Sean Kennedy, M.D.
Jane E. Mahaffey, M.D.
Matthew A. Miller, M.D.
Albert G. Mulley, M.D.
David M. Slovik, M.D.
Daniel E. Souder, M.D.
Sigmund A. Weitzman, M.D.

Physical Chemist

D. Michael Young, M.D.

Biologists

Jerome Gross, M.D.
Jesse F. Scott, M.D.

Associate Biologists

Romaine R. Bruns, Ph.D.
Nancy L.R. Bucher, M.D.
Geoffrey W.G. Sharp, Ph.D.

Assistant Biologist

John W. Mills, Ph.D.

Assistants in Biology

Maureen T. Gammon, M.D.
J. David Kieffer, Ph.D.
Thomas F. Linsemayer, Ph.D.
Barry Reit, Ph.D.

Biochemist

Roger W. Jeanloz, Ph.D.

Visiting Biochemists

Carl F. Cori, M.D.
John H. Highberger, Ph.D.
Herman M. Kalckar, M.D., Ph.D.

Associate Biochemists

John F. Codington, Ph.D.
Mary L. Stephenson, Ph.D.
Bryan P. Toole, Ph.D.

Assistant Biochemists

Chitra Biswas, Ph.D.
James A. Burton, Ph.D.
Rebecca C. Garland, Ph.D.
Annette A. Herscovics, Ph.D.
Meredith M. Hunter, Ph.D.
Henry Keutman, M.D.
Eliezer Rapaport, Ph.D.
Christopher D. Warren, Ph.D.

Assistants in Biochemistry

Edward A. Carter, D.Sc.
Iih-Nan Chou, Ph.D.
Charles W. Christopher, Ph.D.
Mary B. Clark, Ph.D.
Ban-An Khaw, Ph.D.
Gary Matsueda, Ph.D.
Nasir-ud-Din, Ph.D.
Roslyn B. Orkin, Ph.D.
Andrea Quaroni, Ph.D.
Evelyne Walker-Nasir, Ph.D.

Assistants in Computer Science

Norma S. Justice, B.A.
Rita D. Zielstorff, R.N.

Associate Bacteriologist

Joan C. Kaplan, Ph.D.

Assistant in Bacteriology

Sarabelle M. Annenberg

Assistant in Pharmacology

Elaine Woo, M.D.

Consultants in Medicine

Clarence F. Dewey, Jr., Ph.D.
Benjamin G. Ferris, M.D.
Duncan Neuhauser, Ph.D.
Hugh D. Niall, M.D.
John A. Parsons, B.M., B.Ch.
D. Rao Sanadi, Ph.D.
Thomas W. Smith, M.D.

Consultant in Clinical Pharmacology

Richard I. Shader, M.D.

Consultants in Preventative Medicine

John E. Gordon, M.D.
David J. Rutstein, M.D.

Consultant in Occupational Medicine

George F. Wilkins, M.D.

Consultants in Sociology

Lois B. Biener, Ph.D.
Margaret C. Olendzki, Ph.D.

Consultant Sociologists

John B. McKinlay, Ph.D.
Irving K. Zola, Ph.D.

Consultant in Telemedicine

Robert S. Green, B.A.

Consultant in Health Education at
Bunker Hill Health Center
Kathleen M. Elcox, M.Ed.

DERMATOLOGY

Chief of Service
Thomas B. Fitzpatrick, M.D.

Honorary Dermatologists
John Adams, Jr., M.D.
Earl A. Glicklich, M.D.
Walter F. Lever, M.D.
Robert F. Tilley, M.D.

Senior Dermatologist
Maurice M. Tolman, M.D.

Dermatologist
Howard P. Baden, M.D.

Assistant Dermatologists
Ernesto Gonzalez, M.D.
Richard Masters, M.D.
Martin C. Mihm, M.D.
John A. Parrish, M.D.
Arthur J. Sober, M.D.

Assistants in Dermatology
Michael A. Caruso, M.D.
William F. Gallagher, M.D.
Merrill Liteplo, M.D.
Burnham E. Lamkins, M.D.
Philip L. McCarthy, M.D.
Warwick L. Morison, M.D.

Clinical Associates in Dermatology
Richard A. Clark, M.D.
William L. Curwen, M.D.
Nicholas J. Fiumara, M.D.
John L. Fromer, M.D.
Barbara Gilchrest, M.D.
Robert Griesemer, M.D.
Richard A. Johnson, M.D.
Terry P. Hadley, M.D.
William R. Hill, M.D.
Jeltje A.D. Koumans, M.D.
David B. Mosher, M.D.
Kathleen T. O'Shea, M.D.
Nicholas A. Soter, M.D.
Arthur E. Rhodes, M.D.
E. Laurie Tolman, M.D.
Michael M. Wick, M.D.

Clinical Assistants in Dermatology
Joseph Albert, M.D.
Michael A. Greenwald, M.D.

Associate Biochemists
Irvin H. Blank, Ph.D.
Madhukar A. Pathak, M.B., Ph.D.

Assistant Biochemists
Henry Huang, Ph.D.
Loretta D. Lee, Ph.D.

Assistant in Biochemistry
Joseph Kubilus, Ph.D.

Associate Biologist
George Szabo, Ph.D.

Consultants in Dermatology

Kenneth A. Arndt, M.D.
Harley A. Haynes, M.D.

NEUROLOGY

Chief of Service

Joseph B. Martin, M.D., Ph.D.

Consulting Visiting Neurologist

Raymond D. Adams, M.D.

Honorary Neurologists

G. Colket Caner, M.D.
Edwin M. Cole, M.D.
Charles S. Kubik, M.D.
Harry C. Solomon, M.D.

Senior Neurologists

Mandel E. Cohen, M.D.
Albert C. England, Jr., M.D.

Neurologists

C. Miller Fisher, M.D.
Vincent P. Perlo, M.D.
E. Peirson Richardson, Jr., M.D.

Associate Neurologists

G. Robert DeLong, M.D.
Edwin H. Kolodny, M.D.
James R. Lehrich, M.D.
Ernest H. Picard, M.D.
David C. Poskanzer, M.D.
Peter B-B. Rosenberger, M.D.
Gerald F. Winkler, M.D.
Shirley H. Wray, M.B. Ch.B.
Robert R. Young, M.D.

Assistant Neurologists

Robert H. Ackerman, M.D.
Margaret L. Bauman, M.D.
Verne S. Caviness, Jr., M.D.
Elizabeth C. Dooling, M.D.
Robert E. Flynn, M.D.
Thomas H. Glick, M.D.
J. Philip Kistler, M.D.
K.S. Krishnamoorthy, M.D.
David N. Levine, M.D.
Ira T. Lott, M.D.
Eileen M. Ouellette, M.D.
Stephen W. Parker, M.D.
Bhagwan T. Shahani, M.B., B.S.
Vivian E. Shih, M.D.
Karel van Syckel Toll, M.D.
Alfred D. Weiss, M.D.
Bryan T. Woods, M.D.

Assistants in Neurology

Keith H. Chiappa, M.D.
J. Corwin Fleming, M.D.
Dennis M.D. Landis, M.D.
Harvey L. Levy, M.D.
Daniel A. Pollen, M.D.
Roger S. Williams, M.D.

Clinical Associates in Neurology

Camille B. Draskoczy, Ph.D., M.D.
Fred H. Hochberg, M.D.
William H. Timberlake, M.D.
Edward R. Wolpow, M.D.

Clinical Associate in Psychology (Neurology)

Barbara P. Jones, Ph.D.

Clinical Assistant in Neurology

Robert A. Levine, M.D.

Neurophysiologists

John S. Barlow, M.D.
Elwood Henneman, M.D.
Nelson Y-S. Kiang, Ph.D.

Honorary Neuropathologist

Paul I. Yakovlev, M.D.

Associate Neuropathologist

Karl E. Astrom, M.D.

Assistant in Neuropathology

Edward A. Arees, Ph.D.

Clinical Associate in Neuropathology

Edward D. Bird, M.D.

Biochemists

John Gergely, M.D.
Marjorie B. Lees, Ph.D.
Robert H. McCluer, Ph.D.
Pierre J. Stoffyn, Ph.D.

Associate Biochemist

Frank A. Sreter, Ph.D.

Assistant Biochemists

Firoze B. Jungalwala, Ph.D.
Anne M. Stoffyn, Ph.D.

Psychologists

Murray A. Sidman, Ph.D.
Paul E. Touchette, Ph.D.

Associate Psychologists

Harry A. Mackay, Ph.D.
Lawrence T. Stoddard, Ph.D.

Associate Geneticist

Tchaw-ren Chen, Ph.D.

PSYCHIATRY

Chief of Service

Thomas P. Hackett, M.D.

Honorary Psychiatrists

John A. Abbott, M.D.
Herbert Barry, M.D.
Helene Deutsch, M.D.
Leon Eisenberg, M.D.
Paul M. Howard, M.D.
John C. Nemiah, M.D.
Samuel Silverman, M.D.
Benson R. Snyder, M.D.
Vernon P. Williams, M.D.

Psychiatrists

Ross J. Baldessarini, M.D.
Raquel E. Cohen, M.D.
Thomas F. Dwyer, M.D.
Gerald L. Klerman, M.D.
Aaron Lazare, M.D.
Chester M. Pierce, M.D.
Jerome L. Weinberger, M.D.
Avery D. Weisman, M.D.

Associate Psychiatrists

Jonathan F. Borus, M.D.
Franklin C. Carter, M.D.
Edwin H. Cassem, M.D.
Bruce Fischberg, M.D.
Philip H. Gates, M.D.
Benjamin F. Gill, M.D.
Frederick G. Guggenheim, M.D.
Helen M. Herzan, M.D.
Richmond Holder, M.D.
Gary Jacobson, M.D.
Alfred J.R. Koumans, M.D.
Bernard Levy, M.D.
Maria Lorenz, M.D.
Michel R. Mandel, M.D.
Walter Mann, M.D.
Edward Messner, M.D.
Maxwell G. Potter, M.D.
John A. Renner, M.D.
Jack O. Rice, M.D.
Samuel Silverman, M.D.
Danuta M. Stachiewicz, M.D.
Lionelle D. Wells, M.D.

Assistant Psychiatrists

William H. Anderson, M.D.
Jerrold G. Bernstein, M.D.
Frances J. Bonner, M.D.
Matthew P. Dumont, M.D.
Brian S. Joseph, M.D.
Herbert Levine, M.D.
Edward A. Mason, M.D.
Milton Mazer, M.D.
Steven L. Nickman, M.D.
George W. Rever, M.D.
Joseph E. Schwartz, M.D.

Assistants in Psychiatry

Robert S. Abernethy, III, M.D.
Arthur J. Barsky, III, M.D.
Charles W. Carl, M.D.
Herbert S. Cline, M.D.
Franklin C. Curren, M.D.
Alan J. Gelenberg, M.D.
Sidney Green, M.D.
Ronald O. Hurston, M.D.
Martin B. Keller, M.D.
Ira Lable, M.D.
Theo C. Manschreck, M.D.
William McCourt, M.D.
Robert Mignone, M.D.
Richard G. Morrill, M.D.
George B. Murray, M.D.
Ronald V. Norris, M.D.
J. Patrick O'Brien, M.D.
Malcolm Rosenblatt, M.D.
Lloyd I. Sederer, M.D.
David V. Sheehan, M.D.
Owen S. Surman, M.D.
Calixto Valle, M.D.
Charles A. Welch, M.D.

Clinical Associates in Psychiatry

Henry D. Abraham, M.D.
Harold Abramowitz, M.D.
Irene F. Briggin, M.D.
Max Day, M.D.
Joyce A. Easter, M.D.
William E. Falk, M.D.
Amir M. Farhadi, M.D.
Rochelle R. Friedman, M.D.
Jeffrey M. Gilbert, M.D.
Howard M. Greilsheimer, M.D.
Melvyn L. Grossman, M.D.
Rowen M. Hochstedler, M.D.
Alan M. Jacobson, M.D.
Michael Jellinek, M.D.
Neil R. Johnson, M.D.
Edward K. Katz, M.D.
Stephen Kleinman, M.D.
John F. Morrall, M.D.
Charles S. Mullin, M.D.
Michael Murphy, M.D.
Carlos Neu, M.D.
Armand Nicholi, M.D.
Kenneth Nobel, M.D.
W. Kenner Rawdon, M.D.
Jonathan Rothman, M.D.
Laurence C. Salvesen, M.D.
David Sargent, M.D.
David Satin, M.D.
Robert W. Schlauch, M.D.
Robert W. Shapiro, M.D.
John C. Shershow, M.D.
Jeffrey L. Simmons, M.D.
Lois S. Slovik, M.D.
John Sos, M.D.

Anastasia Kucharski, M.D.
John H. Lamont, M.D.
Joseph Lipinski, M.D.
Michael H. Malamud, M.D.
Martin Merowitz, M.D.
Alexander Miller, M.D.
Harold D. Stalvey, M.D.
Thomas Stewart, M.D.
Frederick J. Stoddard, M.D.
Philip Sullivan, M.D.
Evelyn Waitzkin, M.D.
Leonard R. Weiner, M.D.
Barry R. Zitin, M.D.

Clinical Assistants In Psychiatry

Robert P. Cabaj, M.D.
Joel E. Dimsdale, M.D.
James E. Groves, M.D.
Stuart M. Kameny, M.D.
Nicholas D. Kouretas, M.D.
John C. Kuehnle, M.D.
Gregory L. LaVigne, M.D.
Mark G.F. McCormick, M.D.
Jerrold F. Rosenbaum, M.D.
Linda C. Shafer, M.D.
Abby L. Wasserman, M.D.

Psychologists

Richard R. Peebles, Ph.D.
Gene M. Smith, Ph.D.

Associate Psychologists

Sherry B. Autor, Ph.D.
Sherman Eisenthal, Ph.D.
Warren E. Foote, Ph.D.
Clara Mayo, Ph.D.
J. William Worden, Ph.D.

Assistant Psychologists

Gerald L. Borofsky, Ph.D.
David S. Chedekel, Ed.D.
Ward J. Cromer, Ph.D.
Joel Friedman, Ph.D.
Eleanor Z. Hanna, Ph.D.
Paul D. Lipsitt, Ph.D.
William E. Minichiello, Ed.D.
James J. Muller, Ph.D.
Norman A. Neiberg, Ph.D.

Assistants in Psychology

Marguerite E. Murray, Ph.D.
Joseph P. Paretti, Ed.D.
Linda M. Wasserman, Ph.D.

Clinical Associates in Psychology

Thomas F. Higgins, Ed.D.
Leonard W. Poon, Ph.D.

Clinical Assistants in Psychology

Anne W. Alonso, M.Ed.
Sydney L. Altman, Ph.D.
Richard M. Borofsky, Ed.D.
Lewis B. Klebanoff, Ph.D.
Thomas B. Panowicz, M.Ed.
John Riley, Ph.D.
Joanna B. Rohrbaugh, Ph.D.
J. Scott Rutan, Ph.D.
Bennett S. Slotnick, Ph.D.
Harry Sobel, M.S.
Bonnie Spring, Ph.D.
Judith G. Teicholz, Ph.D.

Assistant Sociologist

Mark G. Field, Ph.D.

Assistant Anthropologist

Sherwin J. Feinhandler, Ph.D.

Psychobiologist

Seymour S. Kety, M.D.

Clinical Associate in Neurochemistry (Psychiatry)
Charles A. Marotta, M.D.

Assistant in Mathematics
Stephen Lorch, B.S.

Consultants in Psychiatry

Wilfred Bloomberg, M.D.
Lucille P. Carter, M.D.
John G. Clark, M.D.
Robert Cserr, M.D.
Gerald E. Davidson, M.D.
Carola B. Eisenberg, M.D.
Freddy Frankel, M.B. Ch.B.
Howard T. Hermann, M.D.
Michael H. Nelson, M.D.
Arthur N. Papas, M.D.
Daniel P. Schwartz, M.D.
William Shelton, M.D.
Peter E. Sifneos, M.D.
Earl G. Solomon, M.D.
Alfred H. Stanton, M.D.
Alan A. Stone, M.D.
Lee H. Miller, M.D.

Consultants in Psychology

Barbara J. Burns, Ph.D.
Edward Blacker, Ph.D.
Arthur J. Bindman, Ph.D.
Philip S. Holzman, Ph.D.
Brendan A. Maher, Ph.D.
Pedrry London, Ph.D.
Alvin Simmons, Ph.D.

Consultant in Forensic Psychiatry
Neil Chayet, LL.B.

CHILDREN'S SERVICE

Chief of Service
Donald N. Medearis, Jr., M.D.

Consulting Visiting Pediatrician
Norman B. Talbot, M.D.

Honorary Pediatricians
Allan M. Butler, M.D.
John A.V. Davies, M.D.

Senior Pediatricians
Leo B. Burgin, M.D.
Robert N. Ganz, M.D.
Ralph A. Ross, M.D.
Eleanor C. Zaudy, M.D.

Pediatricians
John D. Crawford, M.D.
Richard W. Erbe, M.D.
Allan Goldblatt, M.D.
Andrew D. Guthrie, Jr., M.D.
John T. Herrin, M.D.
M. Edward Keenan, M.D.
Thomas C. Peebles, M.D.
Philip J. Porter, M.D.
John C. Robinson, M.D.
Daniel C. Shannon, M.D.
John T. Truman, M.D.
W. Allan Walker, M.D.

Associate Pediatricians
Ronald R. Benz, M.D.
Inese Z. Beitins, M.D.
Hans H. Bode, M.D.
William D. Cochran, M.D.
G. Robert DeLong, M.D.
Edward C. Dyer, M.D.
Leroy L. Eldredge, M.D.
Lawrence J. Essember, M.D.
Lewis B. Holmes, M.D.
Daniel B. Keim, M.D.
Rudolph L. Leibel, M.D.
Richard R. Liberthson, M.D.
John S. Robey, M.D.
Peter B-B. Rosenberger, M.D.
Robert T. Sceery, M.D.
Rudolph Toch, M.D.
I. David Todres, M.D., Ch.B.

Assistant Pediatricians
Alila Y. Antoon, M.D., Ch.B.
Catherine H. Beyer, M.D.
Patsy B. Cipolloni, M.D.
Carla B. Cohen, M.D.
Nathan H. Fearer, M.D.
Arnold D. Fiascone, M.D.
Herbert A. Haessler, M.D.
Gerald W. Hazard, M.D.
John B. Joseph, M.D.
Dorothy H. Kelly, M.D.
Josephine G. Kety, M.D.
K.S. Krishnamoorthy, M.D.
Allan Lapey, M.D.
Yhu-Hsiung Lee, M.D.
Ira T. Lott, M.D.
Aubrey Milunsky, M.D., Ch.B.
Eileen M. Ouellette, M.D.
Stephen L. Reynolds, M.D.
Jordan S. Ruboy, M.D.
William R. VanArsdell, M.D.
David S. Walton, M.D.

Assistants in Pediatrics

Joan W. Barkin, M.D.
Margaret L. Bauman, M.D.
Herbert Boerstling, M.D.
Lucienne A. Cahen, M.D.
John P. Cloherty, M.D.
Lawrence D. Cohan, M.D.
Saul H. Cohen, M.D.
Robert K. Crone, M.D.
Susan A. DeMuth, M.D.
Martin T. Fosburg, M.D.
George A. Glines, M.D.
Michael L. Goldfein, M.D.
Daniel C. Heller, M.D.
Melvyn B. Levine, M.D.
David A. Link, M.D.
Herbert O. Mathewson, M.D.
Robert M. Meyer, M.D.
David C. Osler, M.D.
Susan P. Pauker, M.D.
Leonard H. Plotkin, M.D.
Sarah J. Richards, M.D.
Bruce M. Rosenberg, M.D.
Murray K. Rosenthal, M.D.
Mary D. Scott, M.D.
Eugene R. Tompkins, M.D.

Clinical Associates in Pediatrics

William J. Adelson, M.D.
Elroy E. Anderson, M.D.
Donald J. Annino, M.D.
Doris R. Bennett, M.D.
Frederick Berrien, M.D.
John M. Cohen, M.D.
Marco C. Danon, M.D.
William A. Dickson, M.D.
Robert A. Driscoll, M.D.
John A. Duggan, M.D.
Michael F. Epstein, M.D.
Geraldine G. Feldman, M.D
Joseph W. Fowler, M.D.
Thomas Frank, M.D.
Theodore S. Golden, M.D.
Mark A. Goldstein, M.D.
Mary C. Howell, M.D.
Gretchen Kronenberg, M.D.
Martin E. Leber, M.D.
Sherwood B. Lee, M.D.
Katherine A. Leland, M.D.
Ruth M. Liberfarb, M.D.
Alexander S. MacDonald, M.D.
David L. Maltz, M.D.
Geraldine H. McCormack, M.D.
Edward F. McGrath, M.D.
Terese M. Menke, M.D.
Janice E. Milligan, M.D.
Veronica S. Peterson, M.D.
William Pfeffer, Jr., M.D.
Walter Pick, M.D.
Edward F. Rabe, M.D.
Daniel C. Rectanus, M.D.
Robert H. Ritchie, Jr., M.D.
Elizabeth Ridgway, M.D.
Michael J. Robinson, M.D.
Heike Rolle-Daya, M.B., B.Ch.
Edward C. Saef, M.D.
William A.H. Sammons, M.D.
Albert L. Sheffer, M.D.
David R. Sigelman, M.D.
Myron Siner, M.D.
Paul Solomon, M.D.
Wilhelmina VanDyke, M.D.
Alexander M. Walker, M.D.
Thomas J. Whitfield, M.D.
Robert F. Wilson, M.D.
Melinda K. Zitin, M.D.
Pamela A. Zuckerman, M.D.

Clinical Assistants in Pediatrics

Frederick Z. Bierman, M.D.
Mary Etta King, M.D.

Assistant Biochemist

June R. Aprille, Ph.D.

Assistant Geneticist

Lee B. Jacoby, Ph.D.

Assistant in Genetics

Robert M. Hoffman, Ph.D.

Assistant in Biochemistry
Elizabeth Sajdel-Sulkowska, M.D.

Assistant in Biophysics
Kam-Yee Yu Pang, Ph.D.

Consultants in Pediatrics

William Berenberg, M.D.
T. Berry Brazelton, M.D.
Sheryl Jacobson, D.M.D.
Jerome C. Klein, M.D.
Alexander S. Nadas, M.D.
Boris Senior, M.D.

Consultant in Psychology
Jerome Kagan, M.D.

SURGICAL DIVISION

GENERAL SURGERY

Chief of Surgical Service
W. Gerald Austen, M.D.

Honorary Surgeon
Robert R. Linton, M.D.

Senior Surgeons

Marshall K. Bartlett, M.D.
Bradford Cannon, M.D.
Oliver Cope, M.D.
Gordon A. Donaldson, M.D.
Claude E. Welch, M.D.

Visiting Surgeons

Mortimer J. Buckley, M.D.
John F. Burke, M.D.
John D. Constable, M.D.
R. Clement Darling, Jr., M.D.
Thomas H. Green, Jr., M.D.
Hermes C. Grillo, M.D.
W. Hardy Hendren, M.D.
Francis M. Ingersoll, M.D.
Ronald A. Malt, M.D.
George L. Nardi, M.D.
William C. Quinby, Jr., M.D.
John W. Raker M.D.
John P. Remensnyder, M.D.
George S. Richardson, M.D.
Grant V. Rodkey, M.D.
Paul S. Russell, M.D.
J. Gordon Scannell, M.D.
Chiu-an Wang, M.D.
Frank C. Wheelock, M.D.
Earle W. Wilkins, Jr., M.D.

Associate Visiting Surgeons

Benjamin A. Barnes, M.D.
Glenn E. Behringer, M.D.
Edwin L. Carter, M.D.
Willard M. Daggett, M.D.
John W. Head, M.D.
Stephen E. Hedberg, M.D.
Charles H. Huggins, M.D.
Samuel H. Kim, M.D.
Ashby C. Moncure, M.D.
Leslie W. Ottinger, M.D.

Assistant Surgeons

William M. Abbott, M.D.
Conrado C. Bondoc, M.D.
Alfred M. Cohen, M.D.
A. Benedict Cosimi, M.D.
Patricia K. Donahoe, M.D.
A. John Erdmann III, M.D.
Michael B. Lewis, M.D.
Michael N. Margolies, M.D.
Andrew L. Warshaw, M.D.
William C. Wood, M.D.

Assistants in Surgery

Cary W. Akins, M.D.
David C. Brewster, M.D.
Thomas F. Dodson, M.D.
Frederick H. Levine, M.D.
James W. May, Jr., M.D.
James J. Reilly, M.D.

Clinical Associates in Surgery

Nile L. Albright, M.D.
Richard C. Austin, M.D.
Joseph R. Barrie, M.D.
Charles T. Claydon, M.D.
Richard R. Curtin, M.D.
James M. Doonan, M.D.
Joel J. Feldman, M.D.
Edward L. Ferguson, M.D.
Frank W. Garran, Jr., M.D.
Irad B. Hardy, M.D.
Clement A. Hiebert, M.D.
Edward E. Jacobs, Jr., M.D.
William G. Lavelle, M.D.
Dexter W. Lawson, M.D.
Richard B. Lewis, M.D.
Randolph D. Maloney, M.D.
John B. McKittrick, M.D.
Charles G. Mixter, Jr., M.D.
Charles G. Mixter III, M.D.
Anthony S. Patton, M.D.
Donald M. Perlman, M.D.
William P. Rogers, Jr., M.D.
S. Peter Sarris, M.D.
James M. Shannon, M.D.
Robert E. Sloane, M.D.
Richard H. Thompson, M.D.
Ronald M. Weintraub, M.D.
Masao Yatsuhashi, M.D.

Clinical Associates in Surgery at the Bunker Hill Health Center

Luciano G. Ladaga, M.D.
Vicente G. Rubin, M.D.

Clinical Assistants in Surgery

Martin J. Bellinger, M.D.
Nilima A. Patwardhan, M.D.
William J. Porell, M.D.
Charles F. Shield III, M.D.

Consultant in Plastic Surgery

Joseph E. Murray, M.D.

Consultants in Surgery

Franklin G. Balch, M.D.
Ernest M. Daland, M.D.
Samuel B. Kirkwood, M.D.
Roy E. Mabrey, M.D.
William V. McDermott, Jr., M.D.
Francis D. Moore, M.D.
John L. Newell, M.D.
Langdon Parsons, M.D.
Horatio Rogers, M.D.
Edwin W. Salzman, M.D.
Fiorindo A. Simeone, M.D.
Reginald H. Smithwick, M.D.
Lamar Soutter, M.D.
George S. Speare, M.D.
John W. Spellman, M.D.
Augustus Thorndike, M.D.

Immunologist

Henry J. Winn, Ph.D.

Assistant Immunologist

Thomas C. Fuller, Ph.D.

Assistant in Immunology

Donald M. Silver, Ph.D.

Associate Biochemists

Ajit Kumar, Ph.D.
David A. Swann, Ph.D.

Assistant Biochemists

Hari G. Garg, Ph.D. David Irwin, Ph.D.
Andre J. Ouellette, Ph.D.

Assistant Biologist

Mary J. Koroly, Ph.D.

Assistant Physiologists

Dennis D. O'Keefe, M.D. Robert R. Wolfe, Ph.D.

Assistants in Physiology

Gillian A. Geffin, M.D., B.S. Joseph Megerman, Ph.D.

Consultant in Physiology

Thomas F. O'Donnell, M.D.

GYNECOLOGY

Chief of Service

James H. Nelson, Jr., M.D.

Consulting Visiting Gynecologist

Howard Ulfelder, M.D.

Gynecologists

Thomas H. Green, Jr., M.D. Janet W. McArthur, M.D.
Francis M. Ingersoll, M.D. George S. Richardson, M.D.

Associate Gynecologist

John W. Grover, M.D.

Assistant Gynecologists

Ann B. Barnes, M.D. Inese Z. Beitins, M.D.
Thomas S. Durant, M.D.

Assistants in Gynecology

David S. Chapin, M.D. Wayne A. Miller, M.D.
William F. Crowley, M.D. Najmosama Nikrui, M.D.
James B. Hall, M.D. Olive M. Soriero, M.D.

Clinical Associate in Gynecology

Bartlett H. Stone, M.D.

Clinical Assistant in Gynecology

Francis H. Boudreau, M.D.

Assistants in Biochemistry (Gynecology)

Thomas M. Badger, Ph.D. David T. MacLaughlin, Ph.D.

Associate Biologist in Gynecology

Leona Zacharias, Ph.D.

Consultants in Gynecology

John Newell, M.D.	Kenneth J. Ryan, M.D.
Langdon Parsons, M.D.	Judson Smith, M.D.
John Rock, M.D.	Benjamin Tenney, M.D.

NEUROSURGERY

Chief of Service

Nicholas T. Zervas, M.D.

Honorary Neurosurgeons

Hannibal Hamlin, M.D.
John S. Hodgson, M.D.
James C. White, M.D.

Consulting Visiting Neurosurgeon

William H. Sweet, M.D., D.Sc.

Senior Neurosurgeons

H. Thomas Ballantine, M.D.
Jost J. Michelsen, M.D.

Visiting Neurosurgeons

Raymond N. Kjellberg, M.D.
Robert G. Ojemann, M.D.

Assistant Visiting Neurosurgeons

Edward P. Baker, Jr., M.D.
Robert M. Crowell, M.D.
Paul H. Chapman, M.D.
Charles E. Poletti, M.D.
James G. Wepsic, M.D.

Clinical Associates in Neurosurgery

Herbert L. Cares, M.D.
Vernon H. Mark, M.D.
Edward C. Tarlov, M.D.

Neurophysiologist in Neurosurgery

Adelbert Ames, III, M.D.

Associate Neurophysiologists in Neurosurgery

Richard H. Masland, Ph.D.
Daniel A. Pollen, M.D.

Assistant in Neurosurgery

Michael H. Lavyne, M.D.

Assistant in Neurophysiology in Neurosurgery

Edwin G. Fischer, M.D.

Assistant in Chemistry in Neurosurgery

Glyn R. Wellum, Ph.D.

Assistant in Immunology in Neurosurgery

Linda P. Merk, Ph.D.

Consultant in Psychology

Suzanne H. Corkin, Ph.D.

Consultant in Neurosurgery

Paul L. Kornblith, M.D.

ORAL SURGERY

Chief of Service
Walter Guralnick, D.M.D.

Visiting Oral Surgeons
Morton Olin, D.M.D.
Earl H. Rosenberg, D.M.D.
J. Henry Stempien, D.M.D.

Associate Visiting Oral Surgeons
R. Bruce Donoff, D.M.D., M.D.
Peter G. Kimball, D.M.D.
Robert C. Lincoln, D.M.D.

Assistant Oral Surgeons
Robert E. Evans, D.M.D.
Edward B. Seldin, D.M.D., M.D.
Barry Agranat, D.M.D.

Assistant in Oral Surgery
John P.W. Kelly, D.M.D., M.D.

Clinical Associates in Oral Surgery
James H. Bresnick, D.M.D.
Stanley R. Cohen, D.M.D.
Edward M. D'Eramo, D.M.D.
Henry D. Howe, D.M.D.
Daniel J. Holland, Jr., D.M.D.
Leonard B. Kaban, D.M.D., M.D.
David A. Keith, B.D.S.
Richard Miner, D.D.S.
Zigmut Pozatek, D.M.D.
Howard Seplowitz, D.M.D.
Leonard B. Shulman, D.M.D.
Edward L. Sleeper, D.D.S.
William H. Tingey, Jr., D.M.D.

Clinical Assistant in Oral Surgery
Richard J. Spence, D.M.D.

Consultant in Oral Pathology
Gerald Shklar, D.D.S.

Consultant in Orthodontics
Carla Evans, D.D.S., D.M.Sc.

Consultant in Maxillofacial Prosthetics
Peter E. Goldberg, D.M.D.

Associate Dentist at Bunker Hill Health Center
Gary S. Goldstein, D.M.D.

Assistant Dentists at Bunker Hill Health Center
Warren F. Green, D.M.D.
Ragnhild Horvath, D.M.D.
Roy A. Rockman, D.D.S.
David Waterfall, D.M.D.

Assistant Dentist at Chelsea Health Center
Sheryl A. Jacobson, D.M.D.

Clinical Associate in Dentistry at Bunker Hill Health Center
Myron Allukian, Jr., D.D.S.
Scott W. Lite, D.M.D.

ORTHOPAEDIC SURGERY

Chief of Service

Henry J. Mankin, M.D.

Honorary Orthopaedic Surgeons

Otto E. Aufranc, M.D.
Melvin Glimcher, M.D.
J. Drennan Lowell, M.D.
Paul Norton, M.D.
Clement Sledge, M.D.
Augustus White, M.D.

Senior Orthopaedic Surgeon

Carter R. Rowe, M.D.

Visiting Orthopaedic Surgeons

Thornton Brown, M.D.
Crawford J. Campbell, M.D.
Paul H. Curtiss, Jr., M.D.
William H. Harris, M.D.
William N. Jones, M.D.
Robert D. Leffert, M.D.
William R. MacAusland, M.D.
Richard J. Smith, M.D.

Associate Orthopaedic Surgeons

Joseph S. Barr, Jr., M.D.
Robert J. Boyd, M.D.
Hugh P. Chandler, M.D.
Michael G. Ehrlich, M.D.
Donald S. Pierce, M.D.
John A. Reidy, M.D.
Edwin T. Wyman, Jr., M.D.

Assistant Orthopaedic Surgeons

Stanley L. Grabias, M.D.
William L. Kermond, M.D.
Dineshkumar Patel, M.D.

Assistants in Orthopaedics

Peter C. Amadio, M.D.
Robert B. Brendze, M.D.
Philip J. Lahey, M.D
Roy A. Meals, M.D.
Indong Oh, M.D.
David P. Simmons, M.D.
Bertram Zarins, M.D.

Clinical Associates in Orthopaedic Surgery

H. Archer Berman, M.D.
Thomas Broderick, M.D.
John H. Chaglassian, M.D.
Subramanyan Jayasankar, M.D.
Harry M.P. Love, M.D.
Steven Manalan, M.D.
Philip I. Salib, M.D.
Robert S. Steinberg, M.D.
Ralph C. Sweetland, M.D.
Elliott L. Thrasher, M.D.

Assistants in Biochemistry

Louis Lippiello, Ph.D.
Benjamin V. Treadwell, Ph.D.

Chief Podiatrist

John D. McLean, D.S.C.

Podiatrists

Edward R. Bloom, D.P.M.
Richard DiMario, D.P.M.
Donald D. Donovan, D.P.M.
Mark E. Lessing, D.P.M.
Edward M. Soloway, D.P.M.
Homer J. Squires, D.P.M.
Jordan J. Winer, D.P.M.

Clinical Assistant to the Orthopaedic Outpatient Department
James S. Hewson, M.D.

Consultants in Engineering Science

Robert W. Mann, Sc.D.	Igor L. Paul, Sc.D.

UROLOGY

Chief of Service
George R. Prout, Jr., M.D.

Honorary Urologist
Sylvester B. Kelley, M.D.

Urologist
Walter S. Kerr, Jr., M.D.

Associate Urologists

Edward C. Parkhurst, M.D.	Lorande Woodruff, M.D.

Assistant Urologists

Alex F. Althausen, M.D.	Niall M. Heney, M.D.
Stephen P. Dretler, M.D.	Hugh H. Young, II, M.D.

Assistants in Urology

K.K. Crooks, M.D.	Peter T. Nieh, M.D.
John A. Heaney, M.D.	Barry N. Nocks, M.D.

William Strickler, M.D.

Clinical Associate
Vernon M. Pais, M.D.

Associate in Biochemistry
Chi-Wei Lin, Ph.D.

DEPARTMENTS

ANESTHESIA

Chief of Department
Richard J. Kitz, M.D.

Honorary Anesthetist
John Hedley-Whyte, M.D.

Anesthetists

George E. Battit, M.D.
John M.R. Bruner, M.D.
Aaron J. Gissen, M.D.
Phillips Hallowell, M.D.
Myron B. Laver, M.D.
Edward Lowenstein, M.D.
Bucknam McPeek, M.D.
Elliott V. Miller, M.D.
Henning Pontoppidan, M.D.
John F. Ryan, M.D.
Donald P. Todd, M.D.

Associate Anesthetists

Hassan H. Ali, M.B., B.Ch.
David J. Cullen, M.D.
Nabil R. Fahmy, M.B., B.Ch.
Nishan G. Goudsouzian, M.B., B.Ch.
Demetrios G. Lappas, M.D.
Alix Mathieu, M.D.
Daniel M. Philbin, M.D.
John J. Savarese, M.D.
Pennathur Sundaram, M.B.B.S.
Stanislaw K. Szyfelbein, M.D.
I. David Todres, M.B., Ch.B.
Sarita G. Walzer, M.D.
Roger S. Wilson, M.D.

Assistant Anesthetists

Lambertus J. Drop, M.D.
Miroslawa T. Jasinska, M.D.
William B. Latta, M.D.
Letty M.P. Liu, M.D.
Philip Liu, M.D.
Michael C. Long, M.D.
Joseph A. Jeevendra, Martyn, M.B.B.S.
Marlene R. Meyer, M.D.
Annetta L. Murphy, M.D.
Daniel L. Nozik, D.D.S.
Mary Kay Patterson, M.D.
Michael A. Rie, M.D.
James T. Roberts, M.D.
Robert C. Schneider, M.D.
Michael T. Snider, M.D.
Warren M. Zapol, M.D.

Assistants in Anesthesia

Robert P. Antonio, M.D.
Keith Ballentyne, M.D.
Frederic M. deBros, M.D.
Robert K. Crone, M.D.
J. Kenneth Davison, M.D.
Daniel F. Dedrick, M.D.
Clifton W. Emerson, M.D.
Anthony George, M.D.
Glenn P. Gravlee, M.D.
Sean K. Kennedy, M.D.
Philip W. Lebowitz, M.D.
Philip J. Morris, M.D.
Jonathan Moss, M.D., Ph.D.
Frederic M. Ramsey, M.D.
Carl E. Rosow, M.D.
Thomas W. Stinson, III, M.D., Ph.D.
Richard S. Teplick, M.D., Ph.D.
Thomas R. VerLee, M.D.,Ph.D.

Clinical Associates in Anesthesia

Rafik Rizk Attia, M.B., B.Ch.
Benjamin G. Covino, M.D.
Bennie Geffin, M.B., B.Ch.
Adly H. Iskandar, M.D.
Charles H. Padget, M.D.
Peter R. Silverstein, M.D.
Eliot M. Slater, M.D.

Psychologist

Gene M. Smith, Ph.D.

Associate Biomedical Engineers

Jeffrey B. Cooper, Ph.D.
Ronald S. Newbower, Ph.D.

Associate Biostatisticioan

John P. Gilbert, Ph.D.

Associate Pharmacologist
Keith W. Miller, D. Phil.

Assistant Biochemist
Janet C. Miller, D. Phil.

Assistant Chemical Engineer
Clark K. Colton, Ph.D.

Consultant in Electrical Engineering
James H. Philip, M.D.

Consultant in Anesthesia
Angelina C. Carvalho, M.D.

PATHOLOGY

Chief of Department
Robert T. McCluskey, M.D.

Honorary Pathologist
Benjamin Castleman, M.D.

Pathologists

Harold F. Dvorak, M.D.
Robert E. Scully, M.D.
Edgar B. Taft, M.D.
Austin L. Vickery, M.D.

Associate Pathologists

Leonard Atkins, M.D.
Robert B. Colvin, M.D.
G. Richard Dickersin, M.D.
Ann M. Dvorak, M.D.
James J. Galdabini, M.D.
Max L. Goodman, M.D.
Avis Jane Lingeman, M.D.
Eugene J. Mark, M.D.
Martin C. Mihm, M.D.
Stanley J. Robboy, M.D.
Alan L. Schiller, M.D.
Priscilla Dienes Taft, M.D.

Assistant Pathologists

Atul K. Bhan, M.D.
John C. Long, M.D.
Karl H. Proppe, M.D.
Wanda M. Szyfelbein, M.D.
Robert L. Trelstad, M.D.
William R. Welch, M.D.

Assistants in Pathology

John T. Fallon, M.D.
Stephen J. Galli, M.D.
David L. Gang, M.D.
Katharine S. Kosinski, M.D.
Joan R. Kumar, M.D.
Ben Z. Pilch, M.D.
Jamie Prat, M.D.

Clinical Associates in Pathology

Sheldon Cooperman, M.D.
James J. Daly, M.D.
Charles G. Huizenga, M.D.
Joel Umlas, M.D.

Honorary Neuropathologist
Raymond D. Adams, M.D.

Neuropathologist
Edward F. Richardson, M.D.

Associate Neuropathologists
Karl Eric Astrom, M.D.
C. Miller Fisher, M.D.

Assistant in Neuropathology
George M. Kleinman, M.D.

Assistant Biochemists
H. Paul Ehrlich, Ph.D.
Neil S. Orenstein, Ph.D.

Consultants in Pathology
Richard B. Cohen, M.D.
Robert Fienberg,M.D.
Morris J. Karnovsky, M.B., B.Ch.
Walter G.J. Putschar, M.D.
Richard Van Praagh, M.D.

RADIATION MEDICINE

Chief of Service
Herman D. Suit, M.D., D. Phil.

Consulting Visiting Radiation Therapist
Milford D. Schulz, M.D.

Radiation Therapist
Chiu-chen Wang, M.D.

Associate Radiation Therapist
William U. Shipley, M.D.

Assistant Radiation Therapists
Chan H. Choi, M.D.
Leonard L. Gunderson, M.D.
Rita M. Linggood, M.B.B.S.
John E. Munzenrider, M.D.

Radiation Biophysicist
Edward R. Epp, Ph.D.

Associate Radiation Biophysicists
Arthur L. Boyer, Ph.D.
Michael Goitein, Ph.D.
Ching Clifton Ling, Ph.D.

Assistant Radiation Biophysicists
Peter J. Biggs, Ph.D.
Karen Doppke, M.S.
Carl E. Friedberg, Ph.D.
Howard Michaels, Ph.D.
Lynn J. Verhey, Ph.D.

Assistants in Radiation Biophysics
Miriam Gitterman (Margrabia), M.S.
Devorah Novack, M.S.

Clinical Associate in Radiation Medicine
Sidney P. Kadish, M.D.

Assistant Radiation Biologist
Muneysau Urano, M.D., Ph.D.

Assistant Biologists
Leo E. Gerweck, Ph.D.
Robert S. Sedlacek, M.S.

Consultant Biologist
Luka Milas, Ph.D., M.D.

Consultant in Epidemiology
Kenneth J. Rothman, Dr.P.H.

Consultant in Oral Surgery
Edward B. Seldin, D.M.D., M.D.

RADIOLOGY

Chief of Radiology
Juan M. Taveras, M.D.

Senior Radiologist
Laurence L. Robbins, M.D.

Radiologists
Christos A. Athanasoulis, M.D.
Roger A. Bauman, M.D.
Robert E. Dinsmore, M.D.
Jack R. Dreyfuss, M.D.
Joseph T. Ferrucci, Jr., M.D.
Reginald E. Greene, M.D.
Marjorie J. LeMay, M.D.
Paul F.J. New, M.D.
Richard C. Pfister, M.D.
Majic S. Potsaid, M.D.
Alfred L. Weber, M.D.
Jack Wittenberg, M.D.
Stanley M. Wyman, M.D.

Associate Radiologists
Kenneth R. Davis, M.D.
Rob H. Kirkpatrick, M.D.
Gerald M. Kolodny, M.D.
Henry J. Llewellyn, M.D.
Kenneth A. McKusick, M.D.
Theresa C. McLoud, M.D.
K. Jack Momose, M.D.
Jeffrey H. Newhouse, M.D.
H. William Strauss, M.D.
Arthur C. Waltman, M.D.
Isabel C. Yoder, M.D.

Assistant Radiologists
Robert H. Ackerman, M.D.
Salvatore A. DeLuca, M.D.
Alan J. Greenfield, M.D.
Stephen W. Miller, M.D.
William T. Murray, M.D.
Robert A. Novelline, M.D.
James T. Rhea, M.D.
Paul Stark, M.D.

Assistants in Radiology
Robert H. Cleveland, M.D.
Mary F. Hauser, M.D.
Daniel B. Kopans, M.D.
Kathleen M. McCarten, M.D.
Peter R. Mueller, M.D.
Joseph F. Simeone, M.D.

Clinical Associates in Radiology

Daniel I. Becker, M.D.
Karl T. Benedict, Jr., M.D.
W. Robert Courey, M.D.
Gail R. Eliot, M.D.
Allan M. Green, M.D.
Steven B. Hammerschlag, M.D.
Joseph Hanelin, M.D.
Murray L. Janower, M.D.
Lester Kalisher, M.D.
Richard E. Land, M.D.
Jorge Merino-de Villasante, M.D.
D. Glyn Millard, M.D.
Abbott R. Miller, M.D.
H. Peter Mueller, M.D.
Robert A. Nebesar, M.D.
Hartley S. Neel, M.D.
Richard G. O'Brien, M.D.
William J. Otto, M.D.
James A. Petersen, M.D.
James J. Pollard, M.D.
John T. Pollard, Jr., M.D.
Thomas E. Shea, M.D.
Vincent R. Sites, M.D.
Philip E. Steeves, M.D.
Edward R. Sun, M.D.
Milton A. Weiner, M.D.
Harold P. Weintraub, M.D.

Clinical Assistants in Radiology

William P. Harbin, M.D.
Robert J. Isler, M.D.
Reinhard R. Jauernek, M.D.
Daniel I. Rosenthal, M.D.

Physicists

Gordon L. Brownell, Ph.D.
Edward W. Webster, Ph.D.

Associate Physicists

Saul Aronow, Ph.D.
Charles A. Burnham, M.S.
David A. Chesler, Sc.D.
Waldo S. Hinshaw, Ph.D.
Bernard Hoop, Ph.D.

Assistant Physicists

Nathaniel M. Alpert, Ph.D.
Frank P. Castronovo, Jr., Ph.D.
John A. Correia, Ph.D.

Assistants in Physics

Linda A. Deveau, M.A.S.
David R. Elmaleh, Ph.D.
Brian W. Murray, Ph.D.

Engineer

Malcolm N. MacKay

Consultants in Radiology

John B. Little, M.D.
Richard Schatzki, M.D.
Lucy F. Squire, M.D.

Consultants in Nuclear Medicine

William H. Harris, M.D.
Gerald M. Pohost, M.D.

Consultants in Dental Roentgenology

Walter C. Guralnick, D.M.D.
R. Bruce Donoff, D.M.D., M.D.

HOUSE STAFF

Residents as of January 1, 1979

MEDICINE

Chief Resident

Leslie Fang, M.D.

Third Year Residents

Daniel B. Carr, M.D.
Juan E. Carrillo, M.D.
Peter Ganz, M.D.
Richard W. Goodgame, M.D.
Randall D. Johnson, M.D.
Suzanne O. McKenzie, M.D.
John V. Mickey, M.D.
Gary A. Palmer, M.D.
Perry G. Pate, M.D.
James M. Richter, M.D.
Leslie G. Selbovitz, M.D.
Daniel I. Sugarman, M.D.
Lennard S. Wilson, M.D.
John S. Wolfson, M.D.
Samuel H. Zimmern, M.D.

Second Year Residents

Perry J. Blackshear, M.D.
Gail L. Bongiovanni, M.D.
John R. Butterly, M.D.
Robert A. Caplan, M.D.
Robert M. Doroghazi, M.D.
Warner C. Greene, M.D.
Richard S. Grossman, M.D.
Richard J. Iseke, M.D.
Marvin A. Konstam, M.D.
Judith M. Kramer, M.D.
Peter A. McCroskery, M.D.
Richard A. Miller, M.D.
Barbara Nath, M.D.
Britain W. Nicholson, M.D.
Stephen N. Oesterle, M.D.
Donald G. Payan, M.D.
Douglas S. Ross, M.D.
Robert E. Safford, M.D.
David M. Steinhaus, M.D.
David J. Weber, M.D.

First Year Residents

Thomas O. Daniel, M.D.
George W. Dec, Jr., M.D.
Michael A. Fifer, M.D.
Ellen L. Finch, M.D.
Roger A. Freedman, M.D.
Edward F. Gibbons, M.D.
Pamela I. Hartzband, M.D.
Peter M. Hoagland, M.D.
Carol J. Jessop, M.D.
David J. Kuter, M.D.
Irene Kuter, M.D.
Timothy J. Ley, M.D.
Allen G. Mask, M.D.
Lawrence G. Miller, M.D.
Thomas A. Mustoe, M.D.
Patrick T. O'Gara, M.D.
Daniel K. Podolsky, M.D.
Nancy A. Rigotti, M.D.
Thomas L. Shook, M.D.
Steven C. Strickler, M.D.
Katharine K. Treadway, M.D.
Dorothy I. Whitmer, M.D.
Lewis T. Williams, M.D.

Clinical Fellow—Acting First Year Resident:

Allan S. Detsky, M.D.

DERMATOLOGY

Chief Resident

John W. Melski, M.D.

Third Year Residents

Khosrow Momtaz-Tabatabai, M.D.
Nestor P. Sanchez, M.D.

Second Year Residents

Robert M. Adrian, M.D.
Karen McKoy, M.D.
Martha J. MacDonald, M.D.

Clinical Fellow—Acting Second Year Resident

Jan E. Muhlbauer, M.D.
Thomas G. Wise, M.D.

First Year Residents

Rita S. Berman, M.D.
Jeffrey S. Greenwald, M.D.
Jo David Fine, M.D.
Emil A. Tanghetti, M.D.

First Year Resident in Dematopathology (Dermatology)

Douglas M. Sawyer, M.D.

Clinical & Research Fellow—Acting First Year Resident

Calvin L. Day, Jr., M.D.

NEUROLOGY

Chief Resident

Allan H. Ropper, M.D.

Third Year Residents

Samir F. Atweh, M.D.
Ira Bergman, M.D.
Peter Bernad, M.D.
Laura R. Ment, M.D.
Amy A. Pruitt, M.D.
Bradley T. Truax, M.D.

Clinical and Research Fellow—Acting Third Year Resident

Paul S. Blachman, M.D.

Second Year Residents

Alfred S. Callahan, III, M.D.
John J. Halperin, M.D.
Amin F. Sabra, M.D.
Richard S.K. Young, M.D.
Edwin L. Zalneraitis, M.D.

Clinical and Research Fellow—Acting Second Year Resident

Steven L. Hauser, M.D.

First Year Residents

Myron F. Beal, M.D.
Shelley A. Cross, M.D.
Michael J. Kaminski, M.D.
Raymond J. Maciewicz, M.D.
Steven M. Portman, M.D.
John W. Stakes, III, M.D.

Clinical and Research Fellow—Acting First Year Resident

C. Philip O'Carroll

PSYCHIATRY

Third Year Residents

Ellen M. Andrews, M.D.
Marie E. Armentano, M.D.
Lawrence E. DuComb, M.D.
Ann C. Ganczewski, M.D.
Christopher D. Gordon, M.D.
Steven E. Gressitt, M.D.
Marc S. Kramer, M.D.
Denise M. Nagel, M.D.
John J. Purcell, M.D.
Theodore A. Stern, M.D.
Glenn R. Yank, M.D.

Second Year Residents

Eric S. Chivian, M.D.
John H. Fetting, M.D.
Richard H. Gable, M.D.
Lawrence J. Giustra, M.D.
Margo P. Goldman, M.D.
Luis R. Gonzalez, M.D.
Linda J. Haines, M.D.
Betty E. Herr, M.D.
Ralph A. Nixon, M.D.
Harvey I. Remmer, M.D.
Nancy A. Verdugo, M.D.

First Year Residents

Eugene V. Beresin, M.D.
Jane E. Dreskin, M.D.
David B. Herzog, M.D.
Katharine G. Kincaid, M.D.
Richard K. Kull, M.D.
Robert B. Lydiard, M.D.
Deborah M. Moran, M.D.
Allan S. Nineberg, M.D.
Gary W. Small, M.D.
Richard C. Tomb, M.D.
Douglas C. Weir, M.D.
Carol A. Wool, M.D.

First Year Associate Resident
Training Status at Salem Hospital

Thomas E. Snyder, M.D.
Shelly Uram, M.D.

First Year Associate Resident
Training Status at Waltham Hospital

James M. Ellison, M.D.
Masha Etkin, M.D.
Michael Joe Orlosky, M.D.

CHILDREN'S SERVICE

Chief Residents

Patricia P. O'Rourke, M.D.

Third Year Residents

Peter T. Greenspan, M.D.
Michael A. Grodin, M.D.
Sandra N. Lehrman, M.D.
William E. Russell, M.D.
Ann L. Sattler, M.D.
Ellen Weinstein, M.D.
Edward E. Zalitis, M.D.

Second Year Residents

Linda A. Bishop, M.D.
Stephen L. Cochi, M.D.
Steven D. Colan, M.D.
Barry W. Heath, M.D.
Joan Fenno Mansfield, M.D.
Charles L. Ryan, M.D.
Lynnae Schwartz, M.D.
Molly R. Schwenn, M.D.
Kathryn Shands, M.D.
Donald Zukin, M.D.

First Year Residents

Ruth L. Berkelman, M.D.
Alan B. Bloch, M.D.
John C. Bucuvalas, M.D.
Margaret A. Coleman, M.D.
E. Greg Koski, M.D.
Elliot J. Krane, M.D.
Mariette Murphy, M.D.
Jeffrey L. Prebluda, M.D.
Hanes M. Swingle, M.D.
Robert J. Waldinger, M.D.

SURGERY

Chief Residents

William P. Adams, M.D.
Thomas F. Dodson, M.D.
Robert A. Guyton, M.D.
James J. Reilly, M.D.
Robert L. Thurer, M.D.

Fifth Year Residents

J. Thomas Goodgame, M.D.
Richard P. Harmel, M.D.
Michel Jean-Baptiste, M.D.
Charles J. McCabe, M.D.
Susan E. Miller, M.D.
Harvey M. Rosen, M.D.
Daniel H. Smith, M.D.

Fourth Year Residents

G. Gregory Gallico, M.D.
Steven W. Guyton, M.D.
Reid H. Hansen, M.D.
Mark S. Hochberg, M. .
Richard J. Morgan, M.D.
Christopher J. Morin, M.D.
Edmond J. Raker, M.D.
M. Kathleen Reilly, M.D.
Russell L. Ryan, M.D.
Paul K. Safer, M.D.
Joseph P. Vacanti, M.D.
Elias Yohai, M.D.

Third Year Residents

Hugh Auchincloss, Jr., M.D.
John C. Baldwin, M.D.
Scott P. Bartlett, M.D.
Robert M. Bojar, M.D.
Wayne M. Derkac, M.D.
Charles M. Ferguson, M.D.
Eric C. Hanson, M.D.
Jeffrey L. Kaufman, M.D.
Virginia K. Langmuir, M.D.
Michael P. LaQuaglia, M.D.
Craig W. Lillehei, M.D.
Raymond S. Martin, M.D.
Bruce A. Perler, M.D.
Gregory E. Scott, M.D.
William C. Scott, M.D.
Ronald G. Tompkins, M.D.

Second Year Residents

Barbara Bassil, M.D.
Richard P. Cambria, M.D.
John L. Crawford, M.D.
Randall D. Gaz, M.D.
Gary S. Haas, M.D.
Mark R. Katlic, M.D.
Ira C. Levine, M.D.
John McDermott, M.D.
Douglas A. Murphy, M.D.
Paul C. Shellito, M.D.
John M. Siliski, M.D.
J. Richard Thistlethwaite, Jr., M.D.
Douglas R. Zusman, M.D.

First Year Residents

Robert G. Atnip, M.D.
Gregory L. Brown, M.D.
William H. Frist, M.D.
Thomas E. Hoerner, M.D.
Suzanne T. Ildstad, M.D.
G. Kimble Jett, M.D.
Steven G. Katz, M.D.
Thomas V. King, M.D.
David W. Rattner, M.D.
Leland G. Siwek, M.D.
Mark E. Steiner, M.D.
Paul N. Uhlig, M.D.

GYNECOLOGY

Second Year Residents

Lucille J. Norstrand, M.D.
Jeffrey Podlas, M.D.

NEUROSURGERY

Assistant in—Acting Chief Resident

Michael H. Lavyne, M.D.

Fifth Year Resident

Peter M. Black, M.D.

Fourth Year Residents

Steven S. Brem, M.D.
Thomas H. Jones, M.D.
Teodoro F. Dagi, M.D.
Robert L. Martuza, M.D.

Second Year Residents

James M. Macon, III, M.D.
Frederick M. Sonstein, M.D.

First Year Residents

Lawrence F. Borges, M.D.
E. Scott Conner, M.D.

ORAL SURGERY

Chief Resident

Nalton F. Ferraro, D.M.D.

Third Year Resident

Thomas W. Connolly, D.M.D.

Second Year Residents

Charles N. Bertolami, D.M.D.
Gregory L. Borah, D.M.D.
Hardev S. Coonar, D.M.D.

First Year Residents

Michelle Copeland, D.M.D.
Michael S. Hauser, D.M.D.

ORTHOPAEDIC SURGERY

Assistant in—Acting Chief Resident

Peter C. Amadio, M.D.
Philip J. Lahey, M.D.

Chief Resident

Melvin D. Young, M.D.

Third Year Residents

Benjamin F. Allen, M.D.
Jonathan L. Fox, M.D.
Jesse B. Jupiter, M.D.
Stephen M. Neely, M.D.
Roger H. Emerson, M.D.
Roger W. Hood, M.D.
George B. McManama, M.D.
Steven E. Selden, M.D.

Second Year Residents

Dinesh N.H. Bhuva, M.D.
Hill Hastings, M.D.
Kenneth Moller, M.D.
Richard D. Scheinberg, M.D.
Stephen S. Wender, M.D.
Tobin N. Gerhart, M.D.
David B. Lovejoy, M.D.
Richard F. Santore, M.D.
Richard E. Strain
Richard J. Zaleske, M.D.

First Year Residents

Thomas M. Brushart, M.D.
Richard S. Idler, M.D.
Frederick L. Mansfield, M.D.
Bryant A. Toth, M.D.
Mark C. Gebhardt, M.D.
Michael J. Joyce, M.D.
Steven L. Shapiro, M.D.
Helmuth W. Trieshmann, Jr., M.D.

UROLOGY

Assistant In—Acting Chief Resident

John A. Heaney, M.D.

Second Year Residents

Pablo Gomery, M.D.
Raymond S. Pong, M.D.
Boyd H. Winslow, M.D.

First Year Residents

Robert J. Bates, M.D.
Stephen Lipson, M.D.
Lenard W. Swain, M.D.

ANESTHESIA

Chief Resident

W. David Watkins, M.D., Ph.D.

Third Year Residents

Kenneth H. Batch, M.D.
Francis D. Harris, M.D.
Charles C. Jeffrey, M.D.
Richard F. Kaplan, M.D.
William R. Kimball, M.D.
Leopold D. Landry, Jr., M.D.
Betty J. Muller, M.D.
Allan P. Reed, M.D.
Walter C. Sheets, M.D.
Anastosios N. Triantafillou, M.D.

Second Year Residents

Salvatore J. Basta, M.D.
Allen W. Buck, M.D.
Lydia A. Conlay, M.D.
Michael N. D'Ambra, M.D.
Timothy H. DeCook, M.D.
James M. Feld, M.D.
Charles A. Hardy, Jr., M.D.
William E. Johnston, M.D.
Mary Kraft, M.D.
Charles E. Laurito, M.D.
David A. Lowe, M.D.
Roger S. Mecca, M.D.
Shigeho Morita, M.D.
Jean-Claude Schellenberg, M.D.
Michael M. Todd, M.D.
Richard C. Tomichek, M.D.
Lewis L. VanHoosear, Jr., M.D.

First Year Residents

Wayne H. Bellows, M.D.
Jeffrey A. Berman, M.D.
Donald S. Bialek, M.D., Ph.D.
Louis V. DiFrancesco, M.D.
Michael R. England, M.D.
Michael T. Gillette, M.D.
Paul R. Hickey, M.D.
Andrew A. Jeon, M.D.
Vincent R. Machaj, M.D.
Timothy G. McGinn, M.D.
Clair F. Miller, M.D.
Brian J. Moench, M.D.
Charles D. Nargozian, M.D.
Richard E. Nelson, M.D.
Leslie A. Newburg, M.D.
Lawrence S. Niren, M.D.
Terrance E. Smith, M.D.
Francis X. Vacanti, M.D.

PATHOLOGY

Chief Resident

Nicholas J. Robert, M.D.

Fifth Year Resident

Ronald L. Sirota, M.D.

Fourth Year Residents

Michael F. Briselli, M.D.
Erika L. Whitmore, M.D.
Jettie V. Hunt, M.D.
Robert H. Young, M.D.

Third Year Residents

Helen R. Fraser, M.D.
A. Kevin Raymond, M.D.

Second Year Residents

Rita M. Addison, M.D.
Gilbert L. Brodsky, M.D
George F. Murphy, M.D.
Thomas H. Aretz, M.D.
F. Curtis Dohan, M.D.
Steven C. Quay, M.D.

First Year Residents

Edward S. Ackerman, M.D.
W. Stephen Black-Schaffer, M.D.
Robert A. Palermo, M.D.
Steven B. Smith, M.D.
Thomas P. Anderson, M.D.
Richard L. Kradin, M.D.
Theresa L. Perrone, M.D.
Paul E. Steele, M.D.

First Year Resident in Dermatopathology (Pathology)

Terence J. Harrist, M.D.

RADIATION MEDICINE

Clinical Fellow—Acting Chief Resident
Anthony H. Russell, M.D.

Second Year Residents

Peter H. Blitzer, M.D.
Daniel E. Dosoretz, M.D.

First Year Residents

Paul E. Allee, M.D
R. Bruce Hoskins, M.D.
Gene Kopelson, M.D.
Julian G. Rosenman

First Year Associate Resident at Waltham Hospital
Daniel F. Flynn, M.D.

RADIOLOGY

Chief Resident
Joseph R. Stock, M.D.

Fourth Year Residents

Carolyn G. Dedrick, M.D.
James D. McChesney, M.D.

Third Year Residents

Gloria J. Chang, M.D.
Robert Greenstein, M.D.
Clifford E. Roemer, M.D.
Peter H. Gordon, M.D.
Courtney C. Neff, M.D.
James A. Scott, M.D.
Eric van Sonnenberg, M.D.

Second Year Residents

Oksana H. Baltarowich, M.D.
Jerry W. Froelich, M.D.
David C. Grant, Jr., M.D.
Clifford D. Lader, M.D.
Phillip J. Rich, M.D.
Paul W. Spirn, M.D.
Beryl Benacerraf-Libby, M.D.
Stuart C. Geller, M.D.
Steven P. Honickman, M.D.
Rose A. Metzger, M.D.
Paul D. Sable, M.D.
Gary G. Winzelberg, M.D.

First Year Residents

Rodney J. Butch, M.D.
Morris A. Diamant, M.D.
Nancy A. Gadziala, M.D.
Kathleen A. McCarthy, M.D.
Richard Sacknoff, M.D.
Patricia K. Coleman, M.D.
Elizabeth A. Dietz, M.D.
Charles A. Kieser, M.D.
Jo-Anne M. O'Malley, M.D.
Clyde W. Vick, III, M.D.

CLINICAL AND/OR RESEARCH FELLOWS

MEDICINE

Edward Paul Amento, M.D.
Philip Crawford Amrein, M.D.
Claudin Auge, M.D.
Kenneth Lee Baughman, M.D.
Elizabeth Belsky, Ph.D.
Michael Jair Benari, M.D.
Donald Eugene Berman, M.D.
Robert Mark Black, M.D.
Jay Elliot Blum, M.D.
Andrew Gabriel Bodnar, M.D.
Joseph Vincent Bonventre, M.D.
Nelson Mark Braslow, M.D.
Franklin Richard Bringhurst, M.D.
Charles Alan Brown, M.D.
Harold Bursztaun, M.D.
Stephen Beaven Calderwood, M.D.
Edward Winslow Campion, M.D.
Susan Ellen Cancelosi, Ph.D.
Blase Anthony Carabello, M.D.
William Dean Carlson, M.D.
Walter Patrick Carney, Ph.D.
David Robert Clemmons, M.D.
Robert James Cody, Jr., M.D.
Hasi Rani Das, Ph.D.
Barry Leonard Davis, M.D.
Jean-Michel Dayer, M.D.
John Philip DiMarco, M.D.
Samuel H. Doppelt, M.D.
Niranjakumer Dudani, M.B.
Thomas H. Ebert, M.D.
Paul Harld Ehrich, Ph.D.
Genvieve Michele Evin, Ph.D.
Mark Charles Fishman, M.D.
Lawrence Henry Frame, M.D.
Hasan Garan, M.D.
Leo Charles Ginns, M.D.
Laurie Hollis Glimcher, M.D.
John Elliott Godine, IM.D.
Scott Mel Hammer, M.D.
William Harm, III, Ph.D.
David Christian Harmon, M.D.
Garner Tripp Haupert, Jr., M.D.
Hans-Peter Hauri, Ph.D.
Geoffrey Noel Hendy, Ph.D.
Lorenzo Herrera, M.D.
Eleanor Thomas Hobbs, M.D.
Sally Ann Holick, Ph.D.
Charles Jude Homcy, M.D.
David Crittenden Hooper, M.D.
David John Stuart Hulmes, Dr. Phil.
John G.R. Hurrell, Ph.D.
Ken-ichi Inui, Ph.D.
John William Jacobs, Ph.D.
Susan Jaken, Ph.D.
Joseph Andrew Jarrell, Ph.D.
Jane Herod Joiner, M.D.
Barbara P. Johnson-Muller, Ph.D.
Henry Walter Jones, M.D.
Robert Gerald Josse, M.D.
Hugo Albert Katus, M.D.
Barry Joshua Kemler, M.D.
Richard Donald Kilkur, Ph.D.
Howard David Kirshenbaum, M.D.
Richared Daniel Klausner, M.D.
Anne Klibanski, M.D.
Richard Ira Kopelman, M.D.
Edward Mark Kowaloff, M.D.
Howard Leigh Kramer, M.D.
David Issac Krohn, M.D.
Herbert Fried Krohn, M.D.
Frederick Gary Kushner, M.D.
Paul William Ladenson, M.D.
Daniel Chia-Sen Lee, M.D.
Pablo Daniel Lew, M.D.
Charles Durwood Little, Jr., Ph.D.
Beverly H. Lorell, M.D.
Joseph Ahmad Majzoub, M.D.
Avi Marom, M.D.
Roger James May, M.D.
Joan Austin McGowan, Ph.D.
Mark Steven McPhee, M.D.
Carl Bliss Monroe, M.D.
Barbara Elizabeth Murray, M.D.
David Matthew Nathan, M.D.
Samuel Robert Nussbaum, M.D.
Robert Dean Okada, M.D.
Urdaneta Igor Felipe Palacios, M.D.
Jane Robin Parnes, M.D.
Joseph Edison Parrillo, Jr., M.D.
Mark Steven Pasternack, M.D.
Richard C. Pasternak, M.D.
Steven Ronald Peikin, M.D.
Tarja-Terttu Tuulikki Maria Pelliniemi, M.D.
Shmuel (Samuel) Penchas, Dr. Med.
Robert Farish Percy, M.D.
Harry Rissler Phillips, III, M.D.
Richard Hamilton Pointer, Ph.D.
John William Popp, Jr., M.D.
Frederick Kenneth Poulin, Jr., M.D.

Ronald F. Poulin, M.D.
Eric Randall Powers, M.D.
Carlos Alberto Rabito, M.D., Ph.D.
Frederick Alan Rapoport, M.D.
Laurie Watson Raymond, M.D.
Ellis Leonard Reinherz, M.D.
Daniel V. Robinson, Ph.D.
Stanley Glenn Rockson, M.D.
Jose Ramon Rovira, M.D.
Fred Howard Rubin, M.D.
Alfred Mitchell Sadler, Jr., M.D.
Edward Wilbur Schroder, Ph.D.
Dominique Andre Schwarzenbach, Ph.D.
Rebecca Siddharth, Ph.D.
Ted Steven Silver, M.D.
Lee Stuart Simon, M.D.
James Robert Snapper, M.D.
James Alan Solomon, Ph.D.
Leonard Joel Sonne, M.D.
Frederick Seacrest Southwick, M.D.
Olie Ivar Stendahl, M.D., Ph.D.
Duane DeBrito Stephens, M.D.
Gary Martin Strauss, M.D.
Uko Takagaki, Ph.D.
Simeon Israel Taylor, M.D.
Janet Thorndike, Ph.D.
George Louglin Tully, III, M.D.
Rocky Sung-Chi Tuan, Ph.D.
Charles B. Underhill, Ph.D.
Niels Henrick Valerius, Cand. Med.
Joel Ira Ward, M.D.
Mary Sharon Webb, M.D.
Lynn Burkhardt Weigel, M.D.
Charles Harris Weiss, M.D.
Tatsumi Yamazaki, Ph.D.
Helen Lu Yin, Ph.D.
Glen Bart Zamansky, Ph.D.
Ken Scott Zaner, M.D.
Vincent R. Zurawski, Jr., Ph.D.
Randall Mark Zusman, M.D.

Visiting Fellows in Medicine

Robert Edward Dutton, M.D.
Anne Demetra Gounaris, Ph.D.
Stanley Arthur Forwand, M.D.
John H. Highberger, Ph.D.
Herman M. Kalckar, Ph.D.

DERMATOLOGY

Joan H. Kincaid, M.D.
Sumala Lopansri, M.D.
Marcia Tonnesen, M.D.

NEUROLOGY

Seth P. Finklestein, M.D.
William D. Goldie, M.D.
Daniel B. Hier,M.D.
Augusto C. Juguilon, M.D.
Frisso A. Potts, M.D.
Eric W.S. Sweet, M.D.

Research Fellows

K.H. Denise Chou, Ph.D.
Paul E. Cooper, M.D.
Agnes M. Huber, Ph.D.
Omanand Koul, Ph.D.
Roger R. Lenke, M.D.
David S. Reiss, Ph.D.
Otto P. Rorstad, M.D.
Maria Z. Salam-Adams, M.D.

PSYCHIATRY

Richard I. Altesman, M.D.
Don Brand, M.A.
Michael Cauly, M.Ed.
Ginger Chappell, Ph.D.
Lewis M. Cohen, M.D.
Milton K. Erman, M.D.
Carol S. Ginandes, Ph.D.
Raoul Harpin, Ph.D.
Judith C. Hester, M.A.
Thomas R. Kelleher, Ph.D.
David Arnow, B.A.
Charles Carroll, M.S.
Kishanlal Chahrabarti, MBBS
Lewis Cohen, M.D.
Carlos N. Davila, M.A.
Samuel Fisk, M.B.A.
Donna B. Greenberg, M.D.
Mary Henderson, M.A.
Terence Hines, Ph.D.
Philip E. Levinson, M.Ed.

Kristen Kuehnle, M.D.
Craig Latham, M.Ed.
Burt Lowe, Ph.D.
Gloria Meares, Ph.D.
Steven Nisenbaum, M.A.
Pamela O. Roffman, M.A.
Barry E. Roy, M.A.
Bruce Shackleton, M.Ed.
Barbara L. Strom, M.A.
Walter Torres, M.A.
Eugene O. Vzogara, M.D.
Constance Lorman, M.Ed.
Nancy Lundy, M.A.
John Maas, M.Ed.
Janice Murphy, Ph.D.
Roberta Pressman, M.Ed.
Maragret S. Ross, M.D.
Lizbeth Schlesinger, M.Ed.
Elizabeth Silverberg, M.A.
Jane Thorbeck, Ed.D.
Kathleen Ulman, M.A.
Keith Wood, Ph.D.
Hildreth Youkilis, Ph.D.

CHILDREN'S SERVICE

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Stanley A. Cohen, M.D.
Joseph J. Hallett, M.D.
Stephen Jacobsen, Ph.D
Ronald Kleinman, M.D.
Kathleen J. Motil, M.D.
Marilyn G. Stearns, M.D.
Stanley Cohen, M.D.
Joseph R. Custer, M.D.
Lynn Hudson, Ph.D.
Marta S. Killner, M.D.
Alan Lake, M.D.
Anne Marie Roodhooft, M.D.
Robert M. Truding, M.D.
John N. Udall, Jr., M.D.

SURGERY

Robert C. Burton, M.B.B.S.
Kenneth Cohn, M.D.
William H. Dietz, M.D.
Dennis L. Fowler, M.D.
John W. Hallet, Jr., M.D.
Akira Hayashi, M.D.
Pamela M. Hurley, Ph.D.
Arnold Miller, M.B.B.Ch.
Nobuatsu Murayama, M.D.
Anne W. Phillips, M.D.
Salvatore Saita, M.D.
John M. Snowden, Ph.D.
Shinichi Takamoto, M.D.
Elaine D. Carrol, M.D.
William S. Coleman, M.D.
Michael J. Durkot, Ph.D.
Reynoso S. Gallo, M.D.
Marilyn Hamilton, Ph.D.
Christopher J. Humphrey, M.B.Ch.B.
Arthur K.C. Li, M.D.
Charles J. Mullany, M.B.B.S.
Patrick J. O'Hara, M.D.
Richard E. Pratt, M.D.
Marinus Eeftinck Schattenkerk, M.D.
Jacques Suaudeau, M.D.
Raphael Walden, M.D.

NEUROSURGERY

Glen A-Wen Pu, Ph.D.
John G. Souretis, M.D.
Steven F. Ronner, Ph.D.
Juan Vielma, M.D.
Claes von Essen, M.D.

ORTHOPAEDIC SURGERY

John R. Allen, M.D.
Yoshitane Hiki, M.D.
A. Lee Gordon, III, M.D.
Douglas R. Miller, Ph.D.
Richard L. Band, M.D.
Didier Bernard Merckx, M.D.
Paul K. Ho, M.D.
Robert U. Velasco, M.D.

UROLOGY

Kathleen Hagen-Cook, M.D.

ANESTHESIA

William B. Chan, D.M.D
Richard F. Davis, M.D.
Wayne S. Leibel, M.Phil.
Michael J. Pringle, Ph.D.
Jean Francois Sauter, Ph.D.
Robert N. Concannon, M.B., B.Ch.
Marcel A. Gunst, M.D.
Myron B. Peterson, M.D., Ph.D.
Edmund G. Reginia
Anthony P. Solley, M.B.B.S.

PATHOLOGY

Clinical and Research Fellows

Robert H. Brown, M.D. (Neuropathology)
James K. Faix, M.D.
Mahpareh Mostoufizadeh-Ghalamfarsa, M.D.
Walter P. Richardson, M.D.

Research Fellows

Geung Hwan Ahn, Ph.D.
Thomas Ebert, M.D.
Nancy Harris, M.D.
Tadahiro Nishi, M.D.
Hossein Safdari-Ghandehari, M.D.
David J. Buttle, B.Sc.
Stan N. Finkelstein, M.D.
Walter K. Jung, M.D.
Edward Poluch, Ph.D.
Frederick H. Silver, Ph.D.
Kirby Smith, D.V.M.

RADIATION MEDICINE

Takashi Yamashita, M.D.

RADIOLOGY

Clinical Fellows

Elaine Joy Arpin, M.D.
Thomas E. Gallant, M.D.
Robert G. Peyster, M.D.
James M. Davis, III, M.D.
John R. Hesselink, M.D.
Joseph L. Zito, M.D.

Clinical and Research Fellows

John Bingham, M.D.
James C. Grotta, M.D.

Research Fellows

Fernando T. Caminha, M.D.
Hinako Toyama, Ph.D.
Abbasst Honarbakhsh, M.D.
Tsunehiro Yasuda, M.D.

Massachusetts Eye and Ear Infirmary

The Ophthalmological and Otolaryngological needs of the Massachusetts General Hospital are served by the Massachusetts Eye and Ear Infirmary, an adjacent but independent specialty hospital. The staff of the Massachusetts Eye and Ear Infirmary is as follows:

MEDICAL STAFF

OPHTHALMOLOGY

ACTIVE STAFF

Chief of Ophthalmology
Claes H. Dohlman, M.D.

Associate Chief of Ophthalmology
Charles D.J. Regan, M.D.

Assistant Chief of Ophthalmology
Richard A. Thoft, M.D.

Surgeons in Ophthalmology

S. Arthur Boruchoff, M.D.
Robert J. Brockhurst, M.D.
Thomas P. Cronin, M.D.
Claes H. Dohlman, M.D.
David D. Donaldson, M.D.
W. Morton Grant, M.D.
B. Thomas Hutchinson, M.D.
Charles D.J. Regan, M.D.
Alfred W. Scott, M.D.
David H. Scott, M.D.
Richard J. Simmons, M.D.
Taylor R. Smith, M.D.
Richard A. Thoft, M.D.

Associate Surgeons in Ophthalmology

Daniel M. Albert, M.D.
Lloyd M. Aiello, M.D.
Charles Beyer, M.D.
Richard B. Chapman, M.D.
H. MacKenzie Freeman, M.D.
Carl G. Freese, M.D.
Stephen J. Fricker, M.D.
Albert Frederick, M.D.
George E. Garcia, M.D.
John R. Gehring, M.D.
Warren D. Haley, M.D.
Ralph H. Hinckley, M.D.
Roland E. Houle, M.D.
Robert C. Lawlor, M.D.
Byron S. Lingeman, M.D.
J. Wallace McMeel, M.D.
George M. Olive, Jr., M.D.
Robert Peterson, M.D.
Baruch J. Sachs, M.D.
Robert Pruett, M.D.
John Sebestyen, M.D.
David Walton, M.D.
Michael Wiedman, M.D.

Assistant Surgeons in Ophthalmology

Chester Boulris, M.D.
Robert Bellows, M.D.
Eliot Berson, M.D.
Don C. Bienfang, M.D.
John M. Carrol, M.D.
Leo T. Chylack, M.D.
Eugene C. Ciccarelli, M.D.
Richard Dallow, M.D.
Elliot Finkelstein, M.D.
Alexander Gaudio, M.D.
Robert A. Gorn, M.D.
Arthur S. Grove, Jr., M.D.
Eric Johnson, M.D.
Joseph C. Kim, M.D.
Mohandas M. Kini, M.D.
Arnold J. Kroll, M.D.
Joel Arthur Kraut, M.D.
Brent W. Lambert, M.D.
Deborah P. Langston, M.D.
Eeva-Liisa Martola, M.D.
Joseph Michon, M.D.
David Miller, M.D.
Edward Murphy, Jr., M.D.
Ernst Meyer, M.D.
Richard M. Robb, M.D.
Perry Rosenthal, M.D.
Harvey H. Slansky, M.D.
Felipe Tolentino, M.D.
Donald R. Weis, M.D.
Silvio von Pirquet, M.D.

Assistants in Ophthalmology

Mark B. Abelson, M.D.
Ann Marie Bajart, M.D.
Jack F. Bowers, M.D.
John B. Constantine, M.D.
Robert B. Cook, M.D.
Stephen Depperman, M.D.
David K. Dueker, M.D.
David L. Epstein, M.D.
Gault M. Farrell, M.D.
Richard P. Floyd, M.D.
C. Stephen Foster, M.D.
Kweku Ghartey, M.D.
Evangelos Gragoudas, M.D.
David S. Greenseid, M.D.
David A. Hill, M.D.
Tatsuo Hirose, M.D.
David S. Hutchison, M.D.
Barry Jacobs, M.D.
Jay H. Kaufman, M.D.
Robert T. Lacy, M.D.
James R. Lee, M.D.
Raymond Liggio, M.D.
Peter B. Mooney, M.D.
Paul E. Pataky, M.D.
James T. Patten, M.D.
David G. Perkins, M.D.
Charles T. Post, M.D.
Thomas Richardson, M.D.
Donald W. Putnoi, M.D.
James Rosenberg, M.D.
Edward A. Ryan, M.D.
Kenneth A. Stampfer, M.D.
Daniel W. Tolpin, M.D.
Clement Trempe, M.D.
Paul F. Vinger, M.D.
George A. Violin, M.D.
Mohammed Z. Wafai, M.D.
Harold A. Woodcome, M.D.

Associate Physician in Ophthalmology

Shirley H. Wray, M.D.

ASSOCIATE STAFF

Assistants in Ophthalmology

Charles D. Belcher, M.D.
Michael Bradbury, M.D.
Edward F. Goodman, M.D.
Philip Harris, M.D.
Kenneth Kenyon, M.D.
Cheraphat Lopansri, M.D.
Peter Lou, M.D.
Leon Remis, M.D.
Theodore Renna, M.D.
Caldwell Smith, M.D.
David Mears Tracy, M.D.
Safa Wagdi, M.D.
Johan Zwann, M.D.

Consulting Chiefs of Ophthalmology

Henry F. Allen, M.D.
Paul A. Chandler, M.D.
David G. Cogan, M.D.
Edwin B. Dunphy, M.D.

Senior Consulting Surgeons in Ophthalmology

D. Robert Alpert, M.D.
Harry E. Braconier, M.D.
Virgil G. Casten, M.D.
Joseph M. Clough, M.D.
Mahlon T. Easton, M.D.
Trygve Gundersen, M.D.
Carl C. Johnson, M.D.
Brendan D. Leahey, M.D.
Sumner D. Liebman, M.D.
Henry A. Mosher, M.D.
Ichiro D. Okamura, M.D.
Irvin L. Pavlo, M.D.
Abraham Pollen, M.D.
Karl Riemer, M.D.
Charles L. Schepens, M.D.
Earl S. Seale, M.D.
Albert E. Sloane, M.D.
Garrett L. Sullivan, M.D.
Francis J. West, M.D.

HONORARY STAFF

Associate Surgeons in Ophthalmology

Frederick B. Breed, M.D.
John M. Hill, M.D.
Charles H. MacLaughlin, M.D.

Assistant Surgeons in Ophthalmology

Julian F. Chisholm, M.D.
Robert Kinder, M.D.
Arthur M. Morrissey, M.D.
Bertha Offenbach, M.D.

SERVICES

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Director

Ophthalmic Pathology

Taylor R. Smith, M.D.
Director

Glaucoma Consultation Service

W. Morton Grant, M.D.
Director

Cornea Service

Kenneth Kenyon, M.D.
Director

Ocular Motility Service

Stephen S. Fricker, M.D.
Director

Neuro-Ophthalmology

Shirley H. Wray, M.D.
Director

Retina Service

Charles D.J. Regan, M.D.
Acting Director

Emergency Room

Arthur S. Grove, M.D.
Acting Director

Pediatric Ophthalmology

David S. Walton, M.D.
Director

Resident Training

C. Stephen Foster, M.D.
Director

Chin Wing Chu, M.D.
Assistant Director

Berman-Gund Laboratory for the Study of Retinal Degenerations

Eliot L. Berson, M.D.
Director

OTOLARYNGOLOGY

ACTIVE STAFF

Chief of Otolaryngology

Harold F. Schuknecht, M.D.

Surgeons in Otolaryngology

William L. Hayden, M.D.
Alfred L. Hurst, M.D.
Thomas R. Klein, M.D.
Robert E. Klotz, M.D.
Robert H. Lofgren, M.D.
William W. Montgomery, M.D.
Harold F. Schuknecht, M.D.

Associate Surgeons in Otolaryngology

Yale J. Berry, M.D.
Allan G. Edwards, M.D.
Richard L. Fabian, M.D.
Edward Jackson, M.D.
Roy A. Johnson, M.D.
Donald G. Keamy, M.D.
John M. Kurkjian, M.D.
Clarence Kylander, M.D.
Carl M. Lieberman, M.D.
Joseph A. Moretti, M.D.
Rufus C. Partlow, M.D.
Marshall Strome, M.D.
Richard C. Webster, M.D.
William R. Wilson, M.D.

Assistant Surgeons in Otolaryngology

Robert P. Cipro, M.D.
Edward G. Glinski, M.D.
Edward E. Jacobs, M.D.
Ely A. Kirschner, M.D.
William G. Lavelle, M.D.
Jon B. Liland, M.D.
Thomas J. Mulvaney, M.D.
Joseph B. Nadol, M.D.
Angelo Pappanikou, M.D.
Stephen A. Smith, M.D.

Assistants in Otolarynology

Barry J. Benjamin, M.D.
Howard M. Ecker, M.D.
James P. Hughes, M.D.
James H. Kelly, M.D.
Trevor J.I. McGill, M.D.
David N. Nash, M.D.
Stephen A. Parker, M.D.
Edward J. Reardon, M.D.
Syed S. Rizvi, M.D.
Howard G. Smith, M.D.
Alfred D. Weiss, M.D.

Consulting Chief of Otolaryngology

LeRoy R. Schall, M.D.

Senior Consulting Surgeons in Otolarynology

Walter J.E. Carroll, M.D.
Charles J. Drooker, M.D.
John R. Frazee, M.D.
Robert L. Goodale, M.D.
Edgar M. Holmes, M.D.
Moses J. Lurie, M.D.
John McKeigue, M.D.
Daniel Miller, M.D.
John R. Richardson, M.D.
Sidney R. Wilker, M.D.
Bernard Zonderman, M.D.

Senior Consulting Associate Surgeons in Otolaryngology

Aram Roopenian, M.D.
John C. Trakas, M.D.

HONORARY STAFF

Associate Surgeons in Otolaryngology

Charles Kent, M.D.
Herman J. Sternstein, M.D.

Assistant Surgeon in Otolaryngology

Elizabeth DeBlois, M.D.

Assistant in Otolaryngology

Frank W. Brady, M.D.

ASSOCIATE STAFF

Associate Surgeon in Otolaryngology

Werner D. Chasin, M.D.

Assistants in Otolaryngology

Robert Wayne Clubb, M.D.
John Nicholas Vandemoer, M.D.

Consultant in Prosthodontia

Peter E. Goldberg, D.D.S.

SERVICES

Richard L. Fabian, M.D.
Chief of the Plastic Service,
Subdivision of Plastic and Reconstructive Surgery

Aram Roopenian, M.D.
Senior Consulting Associate Surgeon
in Plastic and Reconstructive Surgery

Richard C. Webster, M.D.
Associate Surgeon in Plastic and
Reconstructive Surgery

Edward E. Jacobs, M.D.
Assistant Surgeon in Plastic
and Reconstructive Surgery

William G. Lavelle, M.D.
Assistant Surgeon in Plastic
and Reconstructive Surgery

Howard M. Ecker, M.D.
Assistant in Plastic
and Reconstructive Surgery

John Nicholas Vandemoer, M.D.
Assistant in Plastic
and Reconstructive Surgery

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Director, Subdivision of
Otolaryngologic Pathology

Ben Z. Pilch, M.D.
Assistant in Pathology
Subdivision of Otolaryngologic Pathology

William W. Montgomery, M.D.
Director, Head and Neck Tumor Clinic
Director, Endoscopy Service

Thomas J. Mulvaney, M.D.
Associate Director, Endoscopy Service

Nelson Y.S. Kiang, Ph.D.
Director, Eaton Peabody Laboratory

John W. Irwin, M.D.
Director, Microcirculatory Laboratory

DEPARTMENT OF ANESTHESIOLOGY

Chief of Anesthesiology
Porter H. Smith, M.D.

Anesthesiologists

John V. Donlon, M.D.
Jin Woo Kim, M.D.

Assistant Anesthesiologists

Malcolm J. Heslop, M.D.
Daniel W. Lang, M.D.
Kathryn E. McGoldrick, M.D.
David I. Sonn, M.D.
Lily G. Tabbal, M.D.

Assistants in Anesthesiology

Vitali H. DeGuzman, M.D.
Harry R. Frohberg, M.D.
Ismail Seda Sensel, M.D.

Assistants in Anesthesiology
(Part-time)

J.A. Jeevendra Martyn, M.D.
Daniel Nozik, D.D.S.
Allan P. Reed, M.D.
Carl E. Rosow, M.D.

DEPARTMENT OF RADIOLOGY

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Alfred L. Weber, M.D.

Associate Radiologist

Kiyokazu J. Momose, M.D.

Assistant Radiologists

Jeanne Keller, M.D.
Daniel Kido, M.D.
Steven Hammerschlag, M.D.

Consulting Staff

Milford D. Schulz, M.D.
Herman D. Suit, M.D.
Chiu-Cheng Wang, M.D.

MEDICAL UNIT

ACTIVE STAFF

Chief of Medical Unit

Lloyd Axelrod, M.D.

Consultants in Internal Medicine

Gerald J. Doyle, M.D.
Richard A. Field, M.D.

ASSOCIATE STAFF

Consultants in Internal Medicine

Lloyd Axelrod, M.D.
Nelson Braslow, M.D.
Franklin Bringhurst, M.D.
Charles J. Homacy, M.D.
Barbara E. Murray, M.D.
Harry R. Phillips, M.D.
Norman Levine, M.D.

Report of the Trustees

It is an honor to present the 165th Annual Report of the Board of Trustees of the Massachusetts General Hospital. The calendar year 1978 has been marked by slow, somewhat uneven, but nonetheless significant progress toward a start in the solution of the manifold problems facing the hospital. As in previous years these stem from continuing inflation, increasing governmental regulation at both the federal and state levels, complexity of the third party payment systems, and our growing awareness of the deficiencies of our present physical plant, some of the older elements of which are long overdue for replacement or modernization. That perceptible if unspectacular progress has been made during the past year is due in great measure to the untiring efforts of Dr. Sanders and the devoted members of his staff.

Two unrelated but nonetheless momentous events during the past year brought into sharp focus some of the factors responsible for the strength of the Hospital.

On June 2, 1978, John E. Lawrence, Esq., resigned as active Trustee of the Massachusetts General Hospital, thereby bringing to a close a 31-year term of active service to the Hospital. He was elected to the board in 1947, and to its chairmanship in 1964. Chronologically one must look back for more than a century before one meets with a comparable record of service to the institution. In 1947, the bed complement of the Hospital had not reached 400, and its annual operating budget stood at less than $4,000,000. Today the comparable figures are 1,082 beds, and a total annual budget close to $200,000,000. This impressive expansion of the services rendered by the Hospital to the community has set up new stresses and strains and has called for strong and wise leadership for the Hospital in both its intra- and extramural relationships. In the words of the eloquent resolution prepared by Mr. Burr for the Board of Trustees: "We would like to record in our minutes our gratitude for his many years of skillful, sympathetic, and forceful guidance of this great institution through the stormy seas of American social change." To the great good fortune of the Hospital Mr. Lawrence has graciously accepted election as an Honorary Trustee and as President of the Corporation, thus assuring us of his continuing guidance and leadership.

Following Mr. Lawrence's resignation, Mr. John L. Cooper of Dover, Massachusetts, was elected to membership on the Board of Trustees, and Dr. Cheever to the Chairmanship.

The second momentous event of the year was a "natural phenomenon"--the great snowstorm of February, which broke existing records for snowfall in Boston. Snow began falling Monday morning, February 6th, and continued for nearly 48 hours, by which time over 30 inches of snowfall had been recorded. Although technically not a blizzard since the temperature remained above 20 degrees Fahrenheit, high winds caused much drifting. Greater Boston and much of New England were virtually paralyzed for five days, and it was well over a week before the community was able to return to normal activities. That the Hospital continued to operate under these conditions is a tribute to both our regular staff and our volunteers alike. Those who could forced their way through the drifts on foot, on skis, in emergency four-wheel-drive vehicles, and once inside the Hospital remained on duty for the duration of the emergency. Patient care was not permitted to suffer, emergency operations were carried out, meals were served, and employees paid. Although the storm cost the Hospital over $1,000,000 in increased costs and decreased revenue, the demonstration by our staff and volunteers of their courage and their devotion to the Hospital was a heartening one.

A joint MGH-Harvard Medical School **ad hoc** committee completed its work in early 1978, nominating Dr. Joseph B. Martin, then Director of the Neurological Institute in Montreal, to be Chief of Neurology. The nomination was approved by the appropriate Hospital and university committees. Dr. Martin took up his new duties on July 1, 1978, succeeding Dr. Raymond D. Adams who retired from his administrative duties after many years of distinguished and devoted service to the Hospital which stands much in his debt. Fortunately Dr. Adams will continue his connection with the Hospital although he has shifted most of his clinical and research activities to the Eunice Kennedy Shriver Center at the Fernald School in Waltham.

At the Annual Meeting of the Corporation held on May 19, 1978, the Nominating Committee presented the following slate of new members to serve for an initial term of five years: Mr. Hershner Cross, Mr. James E. Davis, Mr. John M. Dixon, Mrs. Ellery Rogers, and Mr. Stanley N. Williams, and at the same time, eight former members were nominated for additional terms of five years each. These nominations were unanimously approved by the members of the Corporation present.

In May 1978, the Hospital lost a distinguished former member of the Board of Trustees, Mr. Ralph Lowell. He had served the Hospital well for many years, first as an active and then as an Honorary Trustee. His devotion to McLean Hospital was deep and sustained, and he served for many years as Chairman of the McLean Hospital Committee of the Board of Trustees. It was with sincere regret that the Trustees noted his passing.

As detailed in last year's report, a special committee on Pension Plan Fiduciaries was appointed in August 1977 and took up its work in the autumn of the same year. After some months of intensive studies and deliberations, the committee in the early spring of 1978 recommended a fiduciary be given responsibility of managing the Hospital's pension fund. This recommendation was approved by the Board of Trustees on March 24th and will be implemented during 1979.

Active planning for the Ambulatory Care Center was resumed in the summer of 1978 following the issuance of a final certificate of need by the Public Health Council. Though the Ten Taxpayers Group representing Charles River Park has exhausted its administrative appeals, this organization has continued to raise objections to the Hospital's plans. The Hospital is continuing its efforts to resolve the matter in a manner satisfactory to both parties. Preliminary planning should be completed by the late spring of 1979 and the architectural plans for the shell by late fall, permitting construction to start before the end of the calendar year. The Hospital plans to construct a new waste disposal building (one story high) at the corner of Blossom and Parkman Streets as well as two new bulk oxygen tanks in a location which will not obscure the vista across the Bulfinch Lawn.

Planning for the Educational Division continues apace. The legislation passed on the last day of the 1977 session of the General Court became effective in April 1978. Nancy T. Watts, Ph.D., has been appointed Acting Provost, and the Education Division's Interim Steering Committee has held two meetings (July and October) under the able leadership of its chairman, Mr. Lawrence. The Board of Trustees voted in November 1978 to initiate active fund-raising efforts as soon as possible, and pending the outcome to plan for a phased start of Master's Degree programs in Dietetics, Nursing, and Physical Therapy in 1980, with the remaining four programs to be initiated as soon as feasible.

The Scientific Advisory Committee, its numbers augmented by the appointment of two new members (Dr. Walter Gilbert, American Cancer Society Professor of Molecular Biology at Harvard University, and Dr. Alexander Rich, Professor of Biophysics at MIT) held its annual meeting on December 8 and 9, 1978. Part of the first day was occupied by attendance at the MGH annual ''Research Symposium'' which as last year was widely attended by research workers from the MGH and other institutions in the Greater Boston area. Dr. Harold Amos of Harvard Medical School gave the principal address at the dinner meeting on December 8th. The Committee held an executive session on the last morning and then met with the General Director and the Chairman of the Board of Trustees in order to discuss its findings and tentative recommendations. In general the Committee was pleased with the progress made, particularly with the plans for a joint effort by Harvard Medical School and the MGH to establish an outstanding Department of Genetics, two of the senior members of which would be located physically at the MGH. The Committee urged strongly that the MGH proceed as rapidly as possible to construct a new (and additional) research facility which would provide among other things adequate space for housing laboratory animals under optimal conditions. A formal report will be submitted by early spring of 1979. The Trustees of the Hospital are much indebted to Dr. Herman N. Eisen, Chairman of the Scientific Advisory Committee, and to the other members for their thoughtful and painstaking analysis of the Hospital's overall research efforts and for their trenchant recommendations concerning the need for additional physical facilities and more generous financial support.

In the spring of 1978 the MGH was surveyed by the Joint Commission on the Accreditation of Hospitals and given accreditation for the coming year.

McLean Hospital once more enjoyed a successful year financially. The small operating surplus was devoted to renovation of outmoded facilities and to reduction of the existing debt. The patient census held up to expectations although a chronic shortage of adequately trained psychiatric nurses has continued to present a problem in patient care. A number of administrative changes have increased the efficiency of operations. As in the case of the general hospital, the staff and the housekeeping and maintenance groups outdid themselves during the great snowstorm of February 1978 with the commendable result that in spite of the emergency there was no diminution in either the amount or quality of patient care.

The Mailman Research Center (which houses among other activities the Ralph Lowell Laboratories) enjoyed its first full year of operation. In recognition of its great promise for research in the neurosciences, the McLean Committee recommended the appointment of a Scientific Advisory Committee modeled on the one in operation at the general hospital. The Board of Trustees approved this request in the fall of 1978, and in December a distinguished committee of outstanding neuroscientists was appointed. The McLean Scientific Advisory Committee is scheduled to hold its first meeting in late March of 1979.

During the year Mr. Darling and Dr. Cheever rotated off the McLean Committee, and Mr. Lazarus was appointed to membership. The appointment of another trustee is scheduled for the spring of 1979.

The achievements of the past year have been solid if unspectacular ones, and credit is due to both the staff and the administration for the significant progress made in the face of increasing difficulties. The next steps forward will be costly ones for they involve the renovation of an aging plant as well as the construction of new facilities to meet the Hospital's acute space needs. Firm in their conviction that the Hospital must maintain its position in the forefront of medicine, the Trustees are laying plans for the inauguration of a major long-term fund-raising drive. As a first step an in depth feasibility study was authorized in the closing days of the year. The report is due in the spring of 1979.

F. SARGENT CHEEVER, M.D.
For the Trustees

Report of the General Director

It is an honor to submit the annual report for the year 1978, my sixth as General Director.

As cited in the report of the Trustees and the GEC, 1978 was a year in which the Hospital moved forward in the face of an increasingly complex regulatory climate toward its off stated goal of developing an Ambulatory Care Center and a program for the Education Division. The beginning foundations of planning a major capital campaign were laid during 1978. The possibility of improved inpatient care facilities is high on the list of priorities, complemented by exploration of the possibility of improvements in facilities for research and education and the ongoing planning for an Ambulatory Care Center. This major subject will occupy all of us over the next several years, and the Trustees will select early in 1979 their preferred approach to meeting the substantial needs they have identified.

Throughout 1978 the Massachusetts General Hospital enjoyed favorable reports concerning the television documentary film "Learning to Care," and at year end we were particularly pleased when it earned a New England Emmy Award for best documentary.

Last spring we celebrated the eagerly awaited opening of new operating rooms and the renovation of the White Recovery Room, increasing our capacity substantially in both areas. This project reflects clearly the dedicated efforts of many individuals and groups vitally concerned with upgrading our ability to deliver patient care in a timely and more effective manner.

The MGH once again received JCAH accreditation in 1979, reflecting the dialogue between the institution and the voluntary agency the purpose of which, to serve as evaluator, consultant and educator, thus assisting hospitals to identify their strengths and weaknesses and providing guidelines for improvement.

We were very pleased in 1978 to see legislation enacted in the Commonwealth exempting research and education activities from the Determination of Need requirements so long as the following conditions are met:

> "Notwithstanding any contrary provision of law, no person or agency of the Commonwealth or any political subdivision thereof shall make substantial capital expenditures for construction of a health care facility or substantially change the services of such a facility unless there is a determination by the department that there is need therefore; provided, however, that no such determination shall be required whenever any such expenditure in excess of one hundred and fifty thousand dollars or any change in service (1) shall be essential to the conduct or research in the basic biomedical or health care delivery areas or to the training of health care personnel, (2) shall at no time result in any increase in the clinical bed capacity or outpatient load capacity of the facility, and (3) the cost of such expenditure or change shall cause no increase in the total patient care charges of the facility to the public for health care services, supplies, and accommodations, as such charges shall be defined from time to time in accordance with section five of chapter four hundred and nine of the acts of nineteen hundred and seventy-six...."

Two significant revisions in our existing educational programs were decided upon over the year: a change last fall for the Shepard-Gill School of Licensed Practical Nursing from a residential to a commuter-based student population and the decision in October to phase out instruction under the present diploma curriculum of the MGH School of Nursing upon completion of instruction to the three classes of students already enrolled.

Developmental work continued apace for two major endeavors:

Planning for the Education Division has been under way since 1973. The year 1978 was notable for the aforementioned legislation, the appointment of acting administrators and faculty for the division, and the selection of an interdisciplinary steering committee. With both internal and external representation this group is charged with guiding start-up plans for bringing the Division's activities on line. In November 1978 the Trustees authorized intensive fund raising for the division and pending the success of this endeavor envision phased start-up of the degree programs beginning with the Master's in Dietetics, Nursing, and Physical Therapy in 1980; to be followed by other programs including a Master's in Speech Pathology; B.S. in Radiologic Technology;B.S in Respiratory Therapy; and a graduate certificate in Social Work.

Planning for the Ambulatory Care Center (ACC) also began in 1973 and has continued apace following the basic principles enumerated below:

1. The ACC is to be self-sufficient, its activities paying rent to cover operating costs and its tenants determining the finishing and furnishing of space.
2. Tenancy will be voluntary with all staff members and all practice forms welcome.
3. All patients will be under the continuing care of an individual or a group of staff physicians.

In addition the following features and advantages of the new facility were recently cited through the GEC:

> "The ACC will provide the physical plant to allow us to remain competitive with Boston practitioners in other newer facilities. In so doing it will help sustain occupancy of inpatients as well.
>
> "The ACC will allow flexibility in medical practice at a time of increasing governmental restrictions on inpatient medical care.
>
> "The ACC will provide a clinical setting that should facilitate the teaching of medical students, residents, and other medical professionals and nonprofessionals in ambulatory care.
>
> "It should provide opportunities to plan and experiment in new organizational patterns or practice, if we wish."

As currently envisioned 69 percent of the space will be devoted to physicians' offices, the rest a mix of radiology, laboratory, ambulatory surgery, pharmacy, and administrative activities. A variety of groups are at work on the many aspects of planning attendant upon such a major undertaking. We foresee that 1979 like 1978 will be a very busy year for all involved with bringing to fruition the concept of an MGH ACC.

There are numerous other activities which could be cited in 1978. I believe the foregoing, taken together with the events cited in the reports of the GEC and the Trustees, suggest the scope of activities this past year and give pause for sober reflection upon the seemingly unending queue of parties and agencies with views, standards, criteria and regulations requiring increasingly diligent attention if we are to move the MGH forward in its missions of patient care, teaching, and research. The times are difficult, but they are exciting, and I am confident at year end that we can continue to move ahead in a timely and effective manner.

CHARLES A. SANDERS, M.D.
General Director

Report of the General Executive Committee

In this, its 66th year, the General Executive Committee convened 36 times. The variety of issues which came under discussion reflected the Hospital's active participation in the range of affairs confronting contemporary medical practice. Of the topics discussed, an increasing number concerned the influence of regulatory agencies on the Hospital. The largest number of issues considered, however, continued to relate directly to Hospital matters.

With commendable modesty, Dr. Henry J. Mankin reported that the house officer orientation program, designed to teach incoming residents cardiopulmonary resuscitation and other necessary procedures, had attained 86 percent compliance. Another important item involving cooperation was raised by Dr. George P. Baker, Jr., who, with customary vigor, pointed out the requirement for obtaining informed consent and for documenting this in the Hospital chart before carrying out surgical or invasive diagnostic procedures. To improve this documentation, Dr. Baker and Dr. Richard J. Kitz reported the level of cooperation weekly to the GEC with the intention of informing each service chief about the performance of his staff. Cooperation has increased to nearly 100 percent over the course of the first six months.

As the Ambulatory Care Center (ACC) becomes less a vision and more a reality, occupancy questions abound. Dr. George L. Nardi, Chairman of the ACC Committee, reviewed the history and current plans of the ACC, including the development of an equitable arrangement of services within the new installation and decisions about which disciplines might be most advantageously placed next to one another. The ACC Committee has been interviewing chiefs of service and others who will be involved in the ACC transition. The many questions extant about this move will be the subject of much GEC discussion in the coming year.

In an effort to cope with the increasingly complex nature of service, Dr. Charles A. Sanders began a program five years ago to provide business managers to aid the chiefs in administering their responsibilities. The activities of these business managers were discussed by the GEC. Two types of service are currently provided; one is entirely fiscal in its orientation while the second is more concerned with the decision-making assistance which can be provided by the business managers through the aid of their data collection and analyses. Some concern was expressed that the line of responsibility be direct to the chief without intrusion by management. Dr. Sanders stressed that the primary reporting relationship of the business managers is directly to the service chief with a lateral relationship to the administration. The GEC was supportive of this concept. It is clear that the role of the business manager in the Hospital remains in the process of evolution.

Drs. Jerome H. Grossman, Andrew D. Guthrie, Jr., and Roger H. Sweet, and Margaret C. Olendzki, Ph.D., and Mr. M. Roy Brooks reported favorably on the programs of the Hospital's two neighborhood health centers: the Bunker Hill Health Center in Charlestown and the Chelsea Health Center. These two centers, in conjunction with the MGH ambulatory care setting, offer unique opportunities for training and research. With the growing emphasis in medical education on primary care in an outpatient setting, these sites have increasing importance to the MGH. Drs. Alexander Leaf and Donald N. Medearis, Jr., commented on the importance of insuring a close relationship between physicians based in neighborhood health centers and their hospital-based counterparts.

An innovative program of extended foster home family care as an alternative to nursing home care was presented by Miss Eleanor Clark. This imaginative proposal is designed to provide a facility for patients who do not require hospitalization or a nursing home setting, but who do need custodial care. A pilot program has been funded, and legislation has been filed in the Commonwealth to permit an extension of this study. If successful, this program will provide badly needed assistance for a population of patients whose number mounts as the number of nursing home beds declines in Massachusetts.

Dr. Herman D. Suit introduced the protocol for an innovative procedure involving intraoperative use of electron beam therapy. The GEC approved its use, and the first patient was treated shortly thereafter. The question of the procedure's cost effectiveness and long-term benefits will be reviewed over the coming months.

Mrs. Jane Claflin reviewed for us the efforts of the trustee-appointed Patient Care Committee, which she chairs. The committee's principal concern is that patients be treated not only with scientific and technical skill but also with interpersonal skill. The GEC thoroughly agreed with the need to draw attention to the matter of courtesy.

Throughout the midwinter months, the Saikewicz decision was discussed in considerable detail. This judicial decision displaced the responsibility for discontinuing life support for the terminally ill patient from the medical caretaker to the judiciary. Relief from the restrictions placed upon the medical staff by this decision came in the spring with the Dinnerstein case. The resolution of this case removed the hardship imposed upon the family of the critically ill by the Saikewicz ruling and restored the balance of responsibility and decision making to the patient's family and the physician. The Chad Green case came up for discussion in March and recurred for continuing comment throughout the remainder of the year. The GEC unanimously concurred in supporting the course followed by the Hospital.

In keeping wth the tradition of the GEC to review periodically the activities of its standing committees, the following reviews took place over the course of the year: Mr. Joseph P. McCue reported on the Budget Committee; Dr. George L. Nardi reported on the Tissue Committee; Mr. DeLanson Y. Hopkins gave an account of the Operations Committee; Dr. Henning Pontoppidan reported on the Critical Care Committee; Mr. Lawrence E. Martin gave a report on the purposes and endeavors of the Resource Allocation Board; and Dr. Earle W. Wilkins, Jr., gave his eighth annual report as Chief of the Emergency Service.

The relationship between the Hospital and the Harvard Medical School (HMS) was discussed a number of times during the year. In order to assure better attendance at faculty meetings and committee meetings at the Quadrangle, the possibility was raised of instituting a shuttle bus service between HMS and MGH. The developing role of the Harvard Medical Center was taken under discussion. In order to clarify this role and to discuss the role of the Harvard Medical Center and its relationship to the Medical School and affiliated hospitals, Deans Daniel C. Tosteson and Mitchell Spellman were invited to attend the GEC. Dean Tosteson described the MGH as "the centerpiece of clinical education." He also stressed the importance of fostering an excellent relationship between HMS and MGH. Furthermore, he commented on the importance of basic science in the hospital setting, a view supported by Dr. Sanders. The changing role of the Harvard Medical Center was touched on by Dr. Tosteson. Under Dean George Packer Berry, its initial focus had been fund raising. Under Dean Robert H. Ebert improved communication among participants was stressed. Dean Tosteson favors the use of the Harvard Medical Center as a forum in which to discuss policy issues.

The Harvard Medical Center Residency Review Committee report was discussed at the GEC with Dean Spellman and Dr. Miles F. Shore attending. There was a difference of view between the HMC Residency Review Committee and members of the GEC about the usefulness of the data to be gathered. It was decided to send representatives from the GEC to speak at the Executive Committee of the Harvard Medical Center and the HMS Faculty Council.

Many other issues were discussed in the GEC; lack of space precludes their thorough description. We discussed the potential development of a cardiac rehabilitation program, plans for a research facility and a research facility committee, both of the above presented by Dr. Alexander Leaf; a proposal to establish a general dental clinic in the new ACC presented by Dr. Walter C. Guralnick; and a protocol for the management of child abuse/neglect at the MGH presented by Dr. Medearis.

There were major MGH appointments and changes in membership of the GEC in 1978. Dr. Joseph B. Martin, formerly of the Montreal Neurologic Institute, became Chief of Neurology at the MGH and Bullard Professor of Neuropathology at HMS, July 1, 1978. Dr. Ronald W. Lamont-Havers, Deputy to the General Director for Research Policy and Administration, was added to the GEC membership. In a reciprocal move, the Chairman of the GEC became a member of the Executive Committee on Research. Dr. Robert J. Boyd was elected as Specialty Practice Representative for three years beginning July 1, 1978, replacing Dr. Joseph T. Ferruci. Dr. Robert T. McCluskey stepped nimbly down from the Chair of the GEC on June 28 and received a warm vote of appreciation for his excellent service over the past two years.

THOMAS P. HACKETT, M.D.
Chairman, General Executive Committee

Report of the Committee on Research

The past year has been a memorable one for the Committee on Research. Not only did many of the recently initiated activities aimed at improved research training support continue to develop into exciting programs, but new efforts were undertaken to improve research facilities and plan basic research in genetics, issues central to the future of the MGH community.

The basis of much of the ongoing activity of COR to meet its responsibilities to the research community is dependent upon the work of its subcommittees. The Subcommittee on Review of Research Proposals (SRRP) (Dr. Gino V. Segre, Chairman) has continued to serve a unique role at the MGH; the committee continued to be extremely helpful to both individual investigators, their department chairmen, and the Hospital administration. Considerable discussion developed concerning the dual function of the committee—improving the scientific and organizational quality of research grants for the benefit of the investigator and assuring for the Hospital that there is adequate surveillance of scientific and social aspects of proposed research. During the year, the Subcommittee developed clearer guidelines under which the goals would be accomplished, the reviews of proposals conducted, and the results reported back to the investigator. The Subcommittee also initiated a one-year study by which a comparison would be made more objectively between the subcommittee's merit evaluation of proposals with that of the funding agencies. During 1978 the Subcommittee reviewed approximately one third more applications than it had done in any previous year, serving to underscore the hard work of the members of SRRP and its importance to the research community.

The Subcommittee on Human Studies (Dr. John A. Mills, Chairman) has continued the tradition pioneered by the MGH in assuring the Hospital and awarding agencies that the rights of human subjects participating in research projects are properly protected. The COR is deeply indebted to the lay members of this Subcommittee who have shown a deep commitment to their responsibilities. An important aspect of this Subcommittee is its ability to quickly and effectively respond to the various proposed Federal regulations concerning clinical investigation.

Important new efforts were initiated in safety, compliance, and effectiveness of the present research facilities at the MGH. A program in systematic survey of electrical safety of research equipment was initiated while inspections and safety programs in a number of other areas were expanded through the efforts of the Subcommittee on Research Safety (Dr. Jesse Scott, Chairman). During 1978, a major renovation of the sixth floor of the Edwards Research Building facilities was undertaken in order that they could be converted to care for dogs and other large animals in conformance with Department of Agriculture requirements. These activities and assisting in long range planning for improved animal facilities (discussed below) were ably guided by the Animal Care Subcommittee (Dr. Charles Huggins, Chairman).

The Research Training Committee (Dr. Robert L. Trelstad and Dr. Harold F. Dvorak, Co-chairmen) continued to make available to the research community innovative lecture programs as part of the effort to strengthen formal didactic training for our research fellows. In the spring, a lecture series on ‘‘Molecular Biology of Gene Expression in Higher Organisms’’ was undertaken and was judged highly successful in content and attendance. The fall lecture series was a first of its kind on ‘‘Analytical Advances in Biomedical Experimentation.’’ During this latter series further ties were established with HMS; the lectures were taped for use as part of the Harvard Televised Seminar series in addition to continuing the program of televising to the MGH several of the basic lecture seminars held at the Medical School.

The Subcommittee on Research Policy and Planning (Dr. Edgar Haber, Chairman) undertook initial exploration of two major problems: the future of animal care facilities, and the future needs for additional laboratory space for the research community. A survey and report by Albert Jonas, D.B.M., Professor and Chairman, Section of Comparative Medicine, Yale University, was extremely helpful as a basis of discussion and planning. The special task force on animal care headed by Dr. Paul Russell reviewed future needs for research space, the Subcommittee explored the feasibility of a new research building and the needs which it might meet. As the issues became clarified, a task force was established by the General Director under the Chairmanship of Dr. Alexander Leaf to produce a plan to meet the dual goals of improved space for animal care and use and future research space needs. The plan evolved was used as the basis of a discussion with the Scientific Advisory Committee and the Trustees.

Of particular importance to the research community is the future of the Huntington Laboratories. The basis of this concern was the retirement of Dr. Paul C. Zamecnik due in June 1979 after a long and distinguished career, as well as effective use of the funds created to support the other basic science position, until recently, ably held by Dr. Herman M. Kalckar. These two able basic scientists and their co-workers had done much to stimulate and produce a focus of basic research at the MGH. These issues were addressed in a series of meetings between the General Director, members of the Executive Committee on Research, and the Dean. As a result, it is planned to establish a major basic science program in basic genetics at the MGH, closely linked to a new department at the HMS. A search committee has been appointed by Dean Tosteson to identify five outstanding senior investigators in genetics to serve as tenured Professors at Harvard, two of which would be based at the MGH.

The program of interaction with industry has been progressing well but has been limited primarily by lack of staff to adequately administer these programs. As a result of discussions with the General Director, the Patent Committee, the Executive Committee on Research, and the Office of the General Counsel, a new Office of Technology Administration (OTA), will be established reporting to the Research Office. The Director, Mr. Marvin C. Guthrie, will also have responsiblities as Special Counsel to the Office of the General Counsel. The Patent Committee,under the Chairmanship of Mr. William J. McCune Jr., representing the Board of Trustees, has been most helpful in guiding activities of the program.

The need at the MGH for an individual to supervise compliance with Federal requirements for accountablity of research equipment as well as to initiate programs in improved equipment utilization and bulk purchasing of research supplies had been recognized for many years. Of particular note in 1978 was the appointment of Ms. Evelyn D'Amato as Research Materials Coordinator. Working closely with the Purchasing Department under Mr. Thomas Kelly, Ms. D'Amoto has made impressive progress in these areas. Preliminary steps were also taken to systematize approaches to sources of research support and provide a consultative service for investigators. This activity was a joint effort between the Research Office, represented by Dr. Ralph G. Meader, and the Resources and Development Office represented by Mr. Joseph C. Donnelly Jr. and Ms. Melanie Hoffman.

Three outstanding colloquia were presented by the Subcommittee on Research Colloquia (Dr. Paul Russell, Chairman). The first, in April, was by Dr. Donald S. Fredrickson, Director of the National Institute of Health, who spoke on "Biomedical Research/Health Research: A Global View." In September, Dr. Kenneth J. Ryan, Chairman of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, spoke on "Ethical Considerations in Research and Medical Care." In December, at the time of the Scientific Advisory Committee meeting, in keeping with tradition, Dr. Harold Amos, as a member of the Scientific Advisory Committee, spoke on "Future of Ph.D. Programs in Biomedical Sciences."

The Committee on Research noted with regret the retirement of Mr. John Lawrence, who served as Chairman of the Board of Trustees for the past 14 years, with expressions of deep appreciation for his outstanding role in guiding the clinical and scholarly affairs of the MGH. COR, as well as the entire Hospital committee, was pleased at the decision of Dr. F. Sargent Cheever to accept the post of Chairman of the Board vacated by Mr. Lawrence.

The Scientific Advisory Committee met at the MGH December 7, 8, and 9, 1978, beginning with a dinner given by the Trustees presided over by Dr. Cheever on the evening of December 7. On the morning of December 8, the second half of the 1978 Research Symposium III was presented. In the afternoon, the Scientific Advisory Committee interacted with members of the MGH Research community in discussions of the report by Dr. Leaf's committee on the new research building and the future research initiatives. There was also lively discussion with regard to the establishment of a basic research program in eukaryotic genetics. The participation of the Dean in this discussion was particularly helpful. The Scientific Advisory Committee on Research looks forward to receiving from the Scientific Advisory Committee via the Trustees, the report and recommendations of the Scientific Advisory Committee on the several important issues discussed as they relate critically to the future of research at the MGH.

JOHN T. POTTS, JR., M.D.
Chairman, Committee on Research

[illegible] the Research Office, represented by Dr. Ralph G. [illegible] and the Research and Development Office represented by [illegible] Medical Hospital, [illegible]

Three [illegible] lectures were presented by the Sub-[illegible] on Research Colloquia (Dr. Paul [illegible], Chairman). [illegible] Dr. Donald S. Fredrickson, Director of the National Institutes of Health, who spoke on "[illegible] Research Health Assistance: A Global View." [illegible], Dr. Kenneth J. Ryan, Chairman of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, spoke on "Ethical Considerations in Research and Medical Care." In December, at the time of the Research Advisory Committee meeting, in [illegible], Dr. Harold Amos, a member of the Research Advisory Committee, spoke on "Future of Ph.D. [illegible] in Biomedical Sciences."

The Council for Research noted with regret the resignation of Mr. [illegible], who served as Chairman of the Board of [illegible] for the past 14 years, with expressions of deep appreciation for his outstanding role in guiding the [illegible] of the [illegible], as well as [illegible] was pleased at the decision of [illegible] to accept the post of Chairman of the Board [illegible].

The Research Advisory Committee met at the [illegible] December 13 and 14, 1978, beginning with a dinner given by [illegible] at which Dr. [illegible] on the [illegible]. The meeting of December [illegible] second half [illegible] was devoted [illegible] Committee [illegible]. There was also

REPORT OF THE TREASURER

In accordance with Article 5 of the By-Laws, the Annual Report of the Treasurer for the fiscal year ending September 30, 1978, which has been abstracted from the auditor's report, prepared by Alexander Grant & Company, is respectfully submitted.

G. LAMAR CRITTENDEN
Treasurer

THE MASSACHUSETTS GENERAL HOSPITAL
BALANCE SHEET
(September 30)
ASSETS

	Combined		General Hospital		McLean Hospital	
	1978	1977	1978	1977	1978	1977
CURRENTS ASSETS						
Cash	$ 2,824,687	$ 3,104,897	$ 2,822,921	$ 6,024,010	$ 1,766	$(2,919,113)
Accounts & Notes Receivable	37,551,243	35,471,850	33,379,370	30,395,339	4,171,873	5,076,511
Less: Allowance for Doubtful Accounts	(3,933,543)	(4,267,719)	(3,491,858)	(3,784,772)	(441,685)	(482,947)
	33,617,700	31,204,131	29,887,512	26,610,567	3,730,188	4,593,564
Advances (Due To) Due From			1,388,969		(1,388,969)	
Inventory	3,381,206	2,974,813	3,188,877	2,801,012	192,329	173,801
Prepaid Expenses & Deposits	1,597,172	1,981,388	1,512,708	1,870,045	84,464	111,343
Estimated Contractural Adjustments	829,477	637,405	788,977	517,405	40,500	120,000
Total Current Assets	42,250,242	39,902,634	39,589,964	37,823,039	2,660,278	2,079,595
NON-CURRENT ASSETS						
Investments at Cost (Quoted Market Value $71,850,866 and 1977 $70,992,460	69,908,370	67,190,311	67,980,496	65,118,727	1,927,874	2,071,584
Mortgages & Notes Receivable	151,118	190,191	151,118	190,191		
Construction & Debt Service Assets	6,359,445	9,881,162	6,359,445	9,881,162		
Construction in Progress	6,635,516	8,011,874	6,635,516	7,999,880		11,994
Land & Buildings	1,224,199	1,224,199	1,224,199	1,224,199		
Advance Payments	929,990	780,207	929,990	780,207		
Total Non-Current Assets	85,208,638	87,277,944	83,280,764	85,194,366	1,927,874	2,083,578
PROPERTY, PLANT AND EQUIPMENT						
Buildings	120,936,259	116,486,718	107,592,238	103,365,932	13,344,021	13,120,786
Equipment	32,797,824	32,859,557	27,105,038	27,592,969	5,692,786	5,266,588
	153,734,083	149,346,275	134,697,276	130,958,901	19,036,807	18,387,374
Less: Accumulated Depreciation	(42,645,109)	(38,991,349)	(34,787,577)	(31,841,025)	(7,857,532)	(7,150,324)
	111,088,974	110,354,926	99,909,699	99,117,876	11,179,275	11,237,050
Land	3,706,904	3,859,038	3,250,918	3,403,052	455,986	455,986
Total Property, Plant and Equipment	114,795,878	114,213,964	103,160,617	102,520,928	11,635,261	11,693,036

LIABILITIES AND FUND BALANCES

	Combined		General Hospital		McLean Hospital	
	1978	1977	1978	1977	1978	1977
CURRENTS LIABILITIES						
Current Maturities of Long Term Debt	$ 255,642	$ 237,229	$ 205,642	$ 186,075	$ 50,000	$ 51,154
Notes Payable-Bank		4,500,000		4,500,000		
	255,642	4,737,229	205,642	4,686,075	50,000	51,154
Accounts Payable	7,745,401	5,967,556	7,127,619	5,618,902	617,782	348,654
Accrued Liabilities	3,306,197	4,113,153	2,870,695	3,555,688	435,502	557,465
Deferred Revenues	272,934	471,707	217,319	222,254	55,615	249,453
Total Current Liabilities	11,580,174	15,289,645	10,421,275	14,082,919	1,158,899	1,206,726
Long-Term Debt						
Less: Current Maturities	35,910,223	37,065,865	34,193,164	35,298,806	1,717,059	1,767,059
Reserves						
Workmen's Compensation	582,766	555,533	582,766	555,533		
Life Insurance	11,677	11,198	11,677	11,198		
Disability	273,884	257,263	273,884	247,723		9,540
Equity in Undistributed Security						
Gains or Investment Pool	19,372,051	20,640,642	18,654,748	19,837,873	717,303	802,769
Fund Balances						
General Fund	18,924,974	15,400,410	16,954,855	13,365,933	1,970,119	2,034,477
Plant Fund	77,730,013	81,410,870	67,861,811	71,536,047	9,868,202	9,874,823
Building Fund	792,243	(942,122)	1,601,243	680,836	(809,000)	(1,622,958)
Depreciation Fund	20,664,126	19,145,336	20,664,126	19,145,336		
Unexpended Restricted						
Endowment Income Fund	2,647,257	2,316,486	2,611,290	2,287,018	35,967	29,468
Fiduciary Principal	1,537,889	795,128	1,532,834	790,428	5,055	4,700
Fiduciary Income	35,341	34,793	35,341	34,793		
Temporary Funds	11,615,142	10,577,429	11,264,498	10,021,998	350,644	555,431
Endowment Funds	40,576,998	38,836,066	39,367,833	37,641,892	1,209,165	1,194,174
	174,523,983	167,574,396	161,893,831	155,504,281	12,630,152	12,070,115
TOTAL LIABILITIES & FUND BALANCES	$242,254,758	$241,394,542	226,031,345	$225,538,333	$16,223,413	$15,856,209

THE MASSACHUSETTS GENERAL HOSPITAL
STATEMENT OF REVENUES & EXPENSES
YEARS ENDED SEPTEMBER 30, 1978 AND 1977

	Combined		General Hospital		McLean Hospital	
	1978	1977	1978	1977	1978	1977
Patient service revenue	$182,289,728	$161,192,711	$159,212,995	$140,381,661	$23,076,733	$20,811,050
Deductions						
Allowances to patients	5,328,679	4,227,113	4,822,430	3,685,783	506,249	541,330
Contractual adjustments	11,251,602	5,802,974	10,834,473	5,435,306	417,129	367,668
Provision for uncollectible accounts	1,569,019	1,947,429	940,812	1,131,799	628,207	815,630
NET PATIENT SERVICE REVENUE	164,140,428	149,215,195	142,615,280	130,128,773	21,525,148	19,086,422
Other operating revenue						
Research and other specific purposes	23,982,726	24,323,024	21,497,638	21,771,223	2,485,088	2,551,801
Indirect cost recovery	4,500,216	5,205,448	4,024,659	4,579,143	475,557	626,305
Miscellaneous	9,900,357	9,516,747	9,062,214	8,851,997	838,143	664,750
TOTAL OPERATING REVENUE	202,523,727	188,260,414	177,199,791	165,331,136	25,323,936	22,929,278
Operating Expenses						
Salaries	99,688,189	93,334,597	84,556,207	79,541,658	15,131,982	13,792,939
Supplies and expenses	70,096,737	64,806,280	63,663,536	59,116,135	6,433,201	5,690,145
Provision for depreciation	6,540,802	5,971,179	5,833,594	5,347,248	707,208	623,931
Interest	3,730,766	2,657,214	3,452,844	2,492,264	277,922	164,950
	180,056,494	166,769,270	157,506,181	146,497,305	22,550,313	20,271,965
Research and other specific purpose direct expenses	23,982,726	24,323,024	21,497,638	21,771,223	2,485,088	2,551,801
INCOME (LOSS) FROM OPERATIONS	(1,515,493)	(2,831,880)	(1,804,028)	(2,937,392)	288,535	105,512
Nonoperating revenue						
Investment and other income transferred from temporary funds	1,795,022	1,477,520	1,730,493	1,407,712	64,529	69,808
Less: Corporation and general expenses	368,757	368,231	347,173	347,785	21,584	20,446
	1,426,265	1,109,289	1,383,320	1,059,927	42,945	49,362
Other	182,806	320,274	51,433	203,562	131,373	116,712
	1,609,071	1,429,563	1,434,753	1,263,489	174,318	166,074
EXCESS (DEFICIENCY) OF REVENUES OVER EXPENSES	$ 93,578	$(1,402,317)	$ (369,275)	(1,673,903)	$ 462,853	$ 271,586

THE MASSACHUSETTS GENERAL HOSPITAL GENERAL HOSPITAL AND McLEAN HOSPITAL COMBINED STATEMENT OF CHANGES IN FINANCIAL POSITION UNRESTRICTED

YEARS ENDED SEPTEMBER 30, 1978 AND 1977

	1978	1977
FUNDS PROVIDED		
Loss from operation	$(1,515,493)	$(2,831,880)
Charges to operations not requiring (providing) funds		
Provision for depreciation	6,540,802	5,971,179
Property tax abatement	80,697	(780,207)
Amortization of bond discount and expenses	44,222	40,321
Nonoperating revenues, net of associated expenses	1,609,071	1,429,563
Funds provided from operations and nonoperating revenues	6,759,299	3,828,976
Gifts and bequests	814,867	3,969,871
Restricted funds transferred	2,115,806	2,406,518
Investment income	249,059	406,679
Plant funds provided by restricted funds	1,573,056	1,480,439
	$11,512,087	$12,092,483
FUNDS APPLIED		
Additions to construction and plant—net	$ 7,451,619	$15,862,574
Construction and debt service assets applied to construction	(3,477,495)	(6,233,232)
Increase in long-term investments	2,301,961	1,514,892
Loss on sale of buildings	44,243	
Reduction of long-term debt	1,155,642	237,230
Increase in advance payments	230,480	
Increase in working capital	3,805,637	711,019
	$11,512,087	$12,092,483
CHANGES IN COMPONENTS OF WORKING CAPITAL		
Increase (decrease) in current assets		
Accounts receivable—net	$ 2,485,970	$ 3,313,281
Inventory	406,393	187,490
Prepaid expenses	(385,960)	597,099
Estimated contractual adjustments	192,072	637,405
	2,698,475	4,735,275
(Increase) decrease in current liabilities		
Current maturities of long-term debt	(18,413)	(16,764)
Notes payable to bank	4,500,000	(3,000,000)
Loans from investment pool	(2,050,000)	(910,000)
Due to (from) other funds	(552,309)	(2,528,368)
Accounts payable	(1,777,845)	1,254,177
Accrued liabilities	806,956	(223,313)
Deferred revenue	198,773	(98,595)
Estimated contractual adjustments	-0-	1,498,607
	1,107,162	(4,024,256)
INCREASE IN WORKING CAPITAL	$ 3,805,637	$ 711,019

THE MASSACHUSETTS GENERAL HOSPITAL
GIFTS & BEQUESTS
(For Year Ended September 30)

Private philanthropy continued to be a very important source of funds for a wide range of activities within The Hospital. During the past year we received over 45,000 contributions totaling approximately $10,000,000 from individuals, foundations and corporations. These generous gifts enabled us to improve our patient care facilities and physical plant, provided support for a variety of basic and clinical research projects, and strengthened our endowment funds. Private philanthropy is a vital factor in our ability to maintain our excellence in patient care, teaching, and research.

THE MASSACHUSETTS GENERAL HOSPITAL
GIFTS & BEQUESTS
(For Year Ended September 30)
GENERAL HOSPITAL FUNDS

	Unrestricted	Building	Special Purpose	Endowment	Other	TOTAL
Individuals						
Gifts	$ 20,810	$1,078,804	$ 450,025	$ 595,450	$376,245	$ 2,521,334
Estates & Trusts	805,303	173,635	138,861	1,051,307		2,169,106
Foundations						
Private	27,276	944,370	1,465,915	74,257		2,511,818
Publicly Supported		85	788,477			788,562
Corporations	1,189	84,443	822,884	11,255		919,771
	854,578	2,281,337	3,666,162	1,732,269	376,245	8,910,591
Government						
Federal			18,952,122			18,952,122
State			900			900
	$854,578	$2,281,337	$22,619,184	$1,732,269	$376,245	$27,863,613

THE MASSACHUSETTS GENERAL HOSPITAL
GIFTS & BEQUESTS
(For Year Ended September 30)

McLEAN HOSPITAL FUNDS

	Unrestricted	Building	Special Purpose	Endowment	Other	TOTAL
Individuals						
Gifts	$ 100	$149,823	$ 135,321			$ 285,244
Estates & Trusts	18,844		10,000			28,844
Foundations						
Private		253,663	162,364	$9,000		425,027
Publicly Supported			117,922			117,922
Corporations		4,180	21,964			26,144
	18,944	407,666	447,571	9,000		883,181
Government						
Federal			1,760,739			1,760,739
State			34,975			34,975
	$18,944	$407,666	$2,243,285	$9,000		$2,678,895

THE MASSACHUSETTS GENERAL HOSPITAL
GIFTS & BEQUESTS
(For Year Ended September 30)
COMBINED FUNDS

	Unrestricted	Building	Special Purpose	Endowment	Other	TOTAL
Individuals						
Gifts	$ 20,910	$1,228,627	$ 585,346	$ 595,450	$376,245	$ 2,806,578
Estates & Trusts	824,147	173,635	148,861	1,051,307		2,197,950
Foundations						
Private	27,276	1,198,033	1,628,279	83,257		2,936,845
Publicly Supported		85	906,399			906,484
Corporations	1,189	88,623	844,848	11,255		945,915
	873,522	2,689,003	4,113,733	1,741,269	376,245	9,793,772
Government						
Federal			20,712,861			20,712,861
State			35,875			35,875
	$873,522	$2,689,003	$24,862,469	$1,741,269	$376,245	$30,542,508

Report of Therapeutic Support Services

The year 1978 was again one of many and diverse activities for the Therapeutic Support Services. We completed two construction projects, entered into planning for several others, new services have been initiated, and some existing services expanded. There have been changes in internal operations, a new teaching program initiated, and a major research activity started.

In July 1978, the final stage of the Operating Room/Recovery Room Project was completed. Thanks to many people's efforts, the project was completed on time and under budget. We now have eight new operating rooms (a net increase of four) and a much expanded and improved recovery room.

On a smaller scale, the White 11 Satellite Pharmacy was completed. This is our third Satellite Pharmacy. We are committed to extending the Unit Dose Pharmacy distribution system, through satellite pharmacies, throughout the Hospital over the next few years.

At the close of 1978, the MGH is actively planning for the construction of the Ambulatory Care Center. For Therapeutic Support Services, this means a new location for ambulatory components of Pharmacy, Surgery, Rehabilitation, Orthopedic Workshop, and Respiratory Care. Additionally, this office was assigned the responsibility for relocating the occupants of the Moseley and Walcott Buildings. These buildings are to be demolished in September 1979 in order to make way for the Ambulatory Care Center construction.

In August, the Resource Allocation Board approved additional staffing for the Rehabilitation Department to meet the increasing demand for their services. As the patient population has become more acutely ill, these services are particularly required to assist in the successful post-operative recuperation of our patients.

A major innovative therapy was begun in June by the Department of Radiation Medicine in conjunction with the Operating Room staffs. Dr. Herman D. Suit, Chief of Radiation Medicine, began treating selected patients on the High Energy Radiation Therapy equipment as part of actual surgical procedures. The early results of this introperative radiation therapy are promising and are being reviewed by the General Executive Committee.

In the Pharmacy Department, we are moving closer to the point where the pharmacists can take the responsiblity for mixing all complex IV-medication solutions. The Laboratory of Computer Sciences has completed their computer programming to provide an automated basis for this system. We plan to have the IV admixture program in place for those parts of the Hospital serviced by the Satellite Pharmacies in 1979.

Dr. Josef Fischer, previously chief of the Hyperalimentation Unit, left the MGH to become Chief of Surgery at the University of Cincinnati Hospitals. Dr. Fischer's fine work will be carried on by Dr. Ronald Malt. Dr. Malt, in conjunction with the Dietary Department, is planning a change in emphasis to include the total nutritional needs of patients requiring supplemental feedings. The Hyperalimentation Unit will take responsiblity for enteral as well as arterial nutrition support.

The Respiratory Care Department, under Dr. Henning Pontoppidan's leadership, entered into an exciting area when it assumed complete control of the Respiratory Care Technician training program, previously operated by Northeastern University. As of September, this program is under the direct control of the MGH with the students receiving the academic training at the Bunker Hill Community College.

On the research front, the Radiation Medicine Department received a major new grant to study the efficacy of Proton Therapy for the treatment of deep-seated tumors. As part of the grant, we received in February a Certificate of Need granting the Hospital permission to purchase and install a specially modified CT scanner and computer to perform treatment planning for patients to be treated with protons.

In closing, I would like to congratulate the staffs of the Therapeutic Support Service departments and thank them for their assistance and contributions throughout 1978.

DAVID M. SEMPLE
Director of Theapeutic Support Services

Report of General Services

The following is the report of the General Services segment of the hospital operation consisting of the Engineering and Maintenance, Building Services, Security, and Parking Departments for the Fiscal Year 1978-1979.

Maintenance Activities:
The many excellent skills available in the Maintenance Department enabled it to undertake, in addition to the usual depreciation and renovation projects, the major construction program involving upgrading of the MGH patient buildings to meet the modern fire safety regulations. Approximately half of the cost of the fire safety work will be saved by having the MGH Maintenance staff do the job (compared to the cost of having an outside architect-engineer-contractor team).

Also, this year saw the completion of a full year of use for the manpower accounting system. The use of the system resulted in significant man-hour savings in the Maintenance Department and in important advances in management information for both the Engineering and Maintenance Department and the Accounting Department.

Engineering Activities:
During the past year the Engineering group played a significantly increasing role in the planning of new construction at the MGH. Major man-hour inputs to the new Ambulatory Care Center, the relocated oxygen and trash collection facilities, and the preliminary planning for the proposed future new Research Building and new MGH consolidated library were accomplished.

The expertise and technical skills of Mr. William Clemons (in the engineering field) and Mr. Carleton Goff (in the architectural area) were highly instrumental in completing a total review of the HEW Citations as applied to the Life Safety Code requirements. Following this effort, they restudied the entire MGH site once again using the new National Bureau of Standards system for evaluating Fire Safety. This intense and complicated effort was required to provide the MGH with a reasonable and acceptable solution to the outstanding HEW Citations and the JCAH Citations while providing the most economical program for the necessary physical corrections to the MGH buildings.

Approval was received to add a staff engineer to the Engineering and Maintenance Department whose work will significantly reduce the cost to the MGH for engineering services now contracted to consultants as well as to provide speedier answers to some of our engineering problems.

Building Services:

During 1978, Building Services continued to provide the necessary daily cleaning services for the physical plant, with emphasis placed on improving the appearance of nearly eight miles of building corridors. Daniel Tanguy, Director of Building Services, and his staff have taken major steps to define more clearly employee performance standards and facility cleanliness criteria in order to develop a more sophisticated quality control program. Job descriptions of the operational employees were updated and the job code system was simplified. The Department's accounting system was expanded in order to provide better fiscal accountability. In addition, the Department took on the responsibility for the facility's pest control program.

Security:

During the past year about 300 entries per month were recorded requesting security assistance. This is about the same as the previous year's total. Of these, about 600 were APS and EW restraint assists. Thirty arrests were necessary throughout the year in order to maintain order and protect MGH property and personnel and 17 employees were terminated because of illegal conduct. Auto thefts were dramatically reduced this year due to the excellent efforts Mr. Thomas Sullivan and his staff have made in this area of surveillance. Only one car was reported stolen from all the MGH parking facilities during the year. There were several incidents of auto breakins and equipment thefts but our increased surveillance in this area resulted in 11 such attempts being thwarted and six arrests and resulting prosecutions made. Private property theft (cash, watches, cameras, clothing, etc.) continues to be a problem and every employee's assistance is once again solicited to challenge and/or report immediately to Security any suspicious person or act they may observe. The Department has increased its after hour escort service and is also now involved in the patient discharge procedures through the Gray Lobby in lieu of the White Lobby. Security coverage is also now provided to our Chelsea Hospital operation through the MGH Security Office.

Parking:

Demands for parking continue to exceed available capabilities as evidenced by the fact that the garages are full for periods of up to 30 minutes several times daily and our employee space waiting list is growing. This is undoubtedly attributable to the fact that the number of transient parkers increased this year by about 60,000. The office of the Commuter Services Coordinator has had some success in promoting public transportation and carpooling and has recently completed a residential file of all employees holding parking permits to assist potential carpoolers to locate available drivers in their residential area. Continued progress in these areas is planned for the forthcoming year. The Commuter Services office is working well as a public relations medium for both employees and visitors and has reduced complaints considerably.

GILBERT J. NESSOLINI
Director of General Services

Report of Materials Management

The pressures of inflation, rate setting, technological innovations, and the prudent buyer concept make it imperative that we maximize the utility of every dollar for patient care, research, and teaching activities. Price competition, value analysis, inventory control, and logistics are all parts of the Materials Management concept which help guarantee a full value return from every dollar spent. Consistent with the last three years, these concepts, along with the Material Management organizational structure and systems, matured significantly this year, producing a greater level of service while reducing costs. While there were no spectacular occurrences, the subtle methodological and attitudinal changes in the MGH environment indicate to me that what is taking place will be of significant value to the Hospital.

For instance, last October the Purchasing Department initiated a cost savings program. The purpose of this program was to identify specific, measurable, and identifiable dollar savings for products purchased this year over last year. If we bought product "A" last year for $1 each, and this year for $.90 each, then the savings for each unit purchased was $.10. Purchasing set a target of $300,000 worth of savings for this first year. After three months, Purchasing had saved over $90,000 in cost savings. Mr. Thomas W. Kelly, Director of Purchasing, prepared a brief outline of the cost savings program and presented examples of specific situations where, through the use of competition, value analysis, and coordination of purchases, departments had contributed to the program. Over the next nine months, Mr. Kelly took this presentation to several individual departments and groups throughout the Hospital. By September 30, 1978, the Purchasing Department had identified over $365,000 in savings ranging from a low of $5 on plastic liners to a high of $42,000 on surgical gloves. In addition, Purchasing, with the help of the Pharmacy Department, negotiated a five-year contract for intravenous solutions which will save the Hospital more than two million dollars over the next five years. More gratifying than the dollars saved, however, was the fact that over 40 departments contributed ideas, support, and their cooperation in the effort.

An essential element in the success or failure of the cost savings program is a good information system. We must know, for instance, what we are buying, from whom, for whom, when, and at what price. The information is used to group orders, establish delivery schedules, negotiate prices, and monitor the vendors compliance with the specific terms of the contract. For three years we have been implementing a computerized Purchasing, Receiving, and Accounts Payable system called P.A.I.R. The P.A.I.R. system provides us with the necessary information for contracts as well as up-to-the-minute information on the Hospital's supply expenses for all of the departments. In October our external auditors, Alexander Grant, established the fact that the P.A.I.R. system was of sufficient quality to be used for auditing purposes. This endorsement was gained after literally thousands of hours of effort from Data Processing, Materials Management, and Accounting personnel. The potential of the P.A.I.R. system to help us reduce cost and increase control over our supplies expense, inventory, and cash flow has not been fully developed. It is the first major system in the Hospital which crosses departmental lines, requiring computer/user interaction, intradepartmental congruency and sequential synchronization, and quite possibly the most sophisticated Purchasing, Receiving, Accounts Payable system in the health care industry. Needless to say, we are all grateful to the individuals who developed the system and are excited about its future.

Mr. Michael Abruzzese, our Materials Manager, left us this year for an administrative position in Materials Management at Saint Elizabeth's Hospital in Boston. To ease the transition, Mike worked with Mr. Richard Perrin, our new Materials Manager, during his last two weeks. Dick brings to his new position a solid background in Materials Management and patient floor operations. His first task will be the reorganization of our external warehousing and the establishment of an offsite distribution center. Other responsibilities include expanding the Par-level distribution system and participating on the various product Standardization Committees.

This year we have established a goal of $325,000 worth of cost savings. The inflation we are experiencing, as well as the intensity of care that is being provided, requires even a greater coordinated effort to achieve our goal. However, I am confident that with the cooperation of the Hospitals' departments, along with an information system, offsite distribution center, the Par-level distribution system, and the Standardization Committee's efforts, achieving this goal is quite possible.

RANDALL P. MCDONNELL
Director of Materials Management

Report of the Medical Services

The year 1978 has been one of settling in and adjusting to our elegant Bigelow medical facility. A number of changes in scheduling and deployment of House Staff coverage of the Medical Services and increased ambulatory experiences for our residents added to a busy, productive year.

Restructuring our residency program has been mandated by changing requirements of the American Board of Internal Medicine (ABIM) as well as by local needs. The ABIM has made a third year of general medical residency a prerequisite to taking the Board examinations. Our program previously had been for two years with the third year of training optional. Thus, the number of our residents in the third year of training was reduced to half of that in each of the first two years and we were privileged to bring in excellent senior residents who had been trained at other institutions. Now we must provide our beginning residents with assurance that if their performance goes well they can complete the required three years of training in our program here. Thus we must provide essentially the same number of training positions in the third year of our program as in the first and second years. We are striving to make these required changes by improving the training experiences for our third year residents without diluting their experiences in the first two years of the program. One very important advantage the increased number of House Staff permits is for us to introduce a significant amount of training in the ambulatory clinics for all our residents, not only for those in our Primary Care Residency Program. Blocks of time in supervised ambulatory practice have been introduced for all second year residents as of July 1, 1978.

Our Primary Care Residency Program is flourishing. Although there are only five new first year resident positions in that program each year (as compared with 18 positions to be filled in the traditional residency track), this year over 40 percent of all applications to our residency program were for the Primary Care Program. This program offers half the training experience in the traditional acute care inpatient medical services and the other half in the clinics. The time in the clinics is spent partially as a member of a small ambulatory group practice in general internal medicine with supervision and teaching and partially with orthopedists, psychiatrists, gynecologists, and dermatologists from whom they receive instruction in the elements of each specialty that are likely to come to a practitioner of general Internal Medicine. Not only should such instruction be useful to any practicing internist, but it fulfills a need that society and governement perceive for the training of physicians for roles in Primary Care as opposed to specialization. We have now "graduated" three classes from our Primary Care Residency Program and the graduates are moving on to a variety of interesting and useful careers both in practice and in adacemic activities.

On July 1, 1978, Dr. George Thibault replaced Dr. Arnold Weinberg as Assistant Chief of Medical Services. Dr. Weinberg had effectively served in this role for three years and resigned to resume his major interests in the teaching and practice of Infectious Diseases. We all are grateful for Dr. Weinburg's many positive contributions to the Service and welcome Dr. Thibault to continue the important major responsibility for our residency and medical student training programs, which his new position entails.

A new Medical Services Unit has been established in the Massachusetts Eye and Ear Infirmary under the direction of Dr. Lloyd Axelrod. This medical unit provides care for the many patients who have medical problems in addition to the eye or otolaryngologic pathology which caused their admission to our neighboring specialty hospital. Dr. Axelrod and his associates consult on the preoperative and postoperative management of the patients in the Eye and Ear Infirmary. With the Unit functioning effectively, it will provide an additional learning experience for our medical residents and one will be assigned to work with Dr. Axelrod as part of our residency training program.

The broad range of research activities that have long characterized the academic units of the Medical Services are flourishing and, as with the excellence of clinical care, continue to maintain a preeminent position for our Hospital.

ALEXANDER LEAF, M.D.
Chief of Medical Services

Report of the Dermatology Service

Patient Care

The Dermatology Service eagerly awaits the construction of the new ambulatory building to relieve the severe overcrowding that now exists in the Dermatology Outpatient Clinic, one of the busiest of all the outpatient units. The consultation and treatment clinics for patients with contact dermatitis, photosensitivity, and pigmentation problems also contribute to this overcrowding. The special diagnostic clinics for pigmented lesions (melanoma) and for skin cancers are now conducted in the commodious and efficient Ambulatory Clinic of the Cox Cancer Center.

The development in 1974, by physicians in the Dermatology Service, of a new method for control of psoriasis by photochemotherapy has led to a large influx of patients. The Phototherapy Unit is open seven days and six evenings a week and more than 300 patients are being treated with photochemotherapy in a special section of the Dermatology Outpatient Clinic. Only patients with severe disabling psoriasis are accepted and all are treated on research protocols. The members of the photobiology group of the Dermatology Service are coordinating a large 16-center national controlled clinical trial on photochemotherapy comprising 1,330 patients and funded by the National Institutes of Health. The Inpatient Service with 10 beds has been fully occupied since it opened in the spring of 1978. There is a long waiting list; more beds are badly needed for this important patient care and teaching facility which is the only inpatient service for specialized dermatologic treatment in Massachusetts, Vermont, Connecticut, and Rhode Island.

Teaching

In addition to three full-time Harvard Medical students who serve as clinical clerks, six to ten medical students who are taking dermatology, opthalmology, and otolaryngology simultaneously are provided with three weekly patient demonstrations. This past year, we have also accepted in our outpatient clinic house staff taking dermatology electives from the Department of Pathology, Medical Services, and the Children's Service.

Research

The research activities of the Dermatology Service, which are summarized in the Research Activities Booklet, include basic and clinical research on disorders of keratinization, melanin biosynthesis, photoimmunology, metabolism of psoralens and clinical research on photochemotherapy, a basic research project in skin optics, clinical research on topical and systemic approaches to sun protection, analysis of the factors affecting the dissemination of malignant melanoma in 1,450 patients accessed by the National Malignant Melanoma Cooperative Clinical Group.

Dermatopathology and the Dermatology Service

The Dermatopathology Diagnostic and Research Unit occupies space on Warren 5. This is a superb mileu for the dermatopathology residents, the senior staff in dermatology, and, beginning in March 1979, for the dermatology resident staff and fellows, inasmuch as a new James C. White Teaching Unit with carols and a small conference room is being created on Warren 5 for use by the research fellows, residents in dermatology and dermatopathology. In 1871, James C. White was named the first Professor of Dermatology in the United States and the funds for this facility have been provided by the White family and friends.

Honors and Promotions

Two physicians who completed their training during the last year have been appointed Head of Dermatology Units in other Harvard affiliated hospitals: Dr. Arthur Rhodes at the Children's Hospital Medical Center and Dr. Michael Wick at the Sidney Farber Cancer Center.

Dr. Thomas B. Fitzpatrick was elected President of the International Pigment Cell Society, a group of 300 scientists and physicians engaged in research on the biology of pigment cells. Dr. Fitzpatrick was also appointed Chairman, Panel on Health Effects of the Climatic Impact Committee, National Academy of Sciences.

Dr. Madhukar Pathak was promoted to the rank of Senior Associate (Biochemistry) in the Department of Dermatology, Harvard Medical School.

Books

Dermatology in General Medicine, Second Edition, Edited by T. B. Fitzpatrick, A. Z. Eisen, K. Wolff, I. M. Freedbergand K. F. Austen. McGraw-Hill Book Company, 1979, 2002 pp.

Between You and Me - A Sensible and Authoritative Guide to the Care and Treatment of Your Skin, J.A. Parrish, B.A. Gilchrest, and T.B. Fitzpatrick, Little Brown 1978, 229 pp.

U.V.A. - Biological Effects of Ultraviolet Radiation with Emphasis on Human Responses to Longwave Ultraviolet, J.A. Parrish, R.R. Anderson, F. Urbach and D. Pitts. and D. Pitts. Plenum Press, 1978 262 pp.

Post Graduate Courses

Dermatology for the Practicing Physician, May 1978, Harvard Medical School

Malignant Melanoma - Recognition and Management, June 1978, Harvard Medical School

Photobiology and Photochemotherapy, American Academy of Dermatology, December 1978.

THOMAS B. FITZPATRICK, M.D.
Chief of Service

Report of the Neurology Service

This past year marked the completion of the distinguished tenure of Raymond Delacy Adams as Chief of the Service, a position he held from 1951. Under his remarkable leadership, the Department trained a large number of academic and clinical neurologists who have gone to distinguished chairs of neurology throughout the world. The MGH Neurology Service became recognized as a foremost department for training in clinical neurology and neuropathological research. Dr. Adams will continue on the staff as Consulting Visiting Neurologist and will remain active in the research and teaching program of the service as Director of the Eunice Kennedy Shriver Center for Mental Retardation.

Clinical Services

The clinical responsibilities of the Neurology Service are comprised of a pediatric and adult section. Plans have been initiated for the organization of both an adult and pediatric Neurology Associates which will encompass the clinical activities of the two services. This reorganization is aimed at delivering more effective patient care and to allocate clinical and teaching responsibilities to members of the staff on a rotational basis to make the most profitable use of time. A number of important ambulatory care activities serve an increasing number of outpatients. Dr. Ernest Picard, Director of the Neurology Clinic, supervises four weekly sessions in the Outpatient Department. Dr. Robert Young and Dr. Bryan Woods see patients with movement disorders in a special clinic held weekly. Dr. Vincent Perlo and staff are responsible for a large number of patients with language and speech disorders. On the pediatric side, Dr. Robert Delong supervises the neurology clinics. A learning disorder clinic supervised by Dr. Peter Rosenberger provides expert consultation for children with neurological disorders.

Resident Training

The Neurology Service has continued to attract superb candidates for entry into the neurologic residency program. In addition to rotations through the Neurology and Neurosurgery Services at the MGH, residents also spend time at the McLean Hospital in psychiatry and at the Shriver Center and the Fernald School in study of neurological disorders of childhood.

Teaching

The Neurology Service is involved in teaching activities at several levels. The service offers six postgraduate courses through the Harvard Medical School Department of Continuing Education. The annual two-week course in neurology which was held in March was attended by 121 physicians.

This course, which has been particularly successful over the past few years, has provided a format for updating of neurological developments. Several teaching conferences are given weekly by the Neurology Service. A basic neuroscience course was begun in the fall of 1978 to provide an indepth review of new developments for the residents and medical students. This course, to continue over three years, will systematically cover areas of basic neuroscience development in terms of their implications for neurologic disease. A weekly research seminar provides a format for review of research topics presented by members of the Neurology Service and for visitors from other centers. A particularly valuable teaching experience has been the combined Neurosurgical-Neurological Grand Rounds, where cases of interest to both services are presented. A number of outside visitors have made the rounds particularly stimulating.

Research Activities

The research activities of the Neurology Service involve a variety of projects that delve into both basic and clinical topics. In the neuropathology section, Dr. Peirson Richardson has continued to investigate the neuropathologic aspects of diseases of the nervous system. The recruitment of Dr. Dennis Landis, an expert in electronmicroscopy, provided the incentive to purchase a new electronmicroscope to update the functions ot the neuropathology unit. A laboratory of neuroendocrine investigation directed by Dr. Martin has been established on Research 4. Three research fellows and two technicians are involved in the study of brain regulation of pituitary secretion and of the effects of peptides on the central nervous system. Dr. Robert Young and his colleagues have continued to examine the physiologic and pathologic basis of tremor assisted by the collaborative efforts of Dr. Chan-Palay of the Department of Neurobiology at the Harvard Medical School. Dr. David Levine has continued studies on higher cortical functions in patients who have suffered insults to the brain, particularly vascular lesions. A number of research projects in the biochemistry of muscle are ongoing under the leadership of Dr. John Gergely at the Boston Biomedical Research Institute. The Shriver Center in Waltham houses a major program project grant involving several members of the service. The studies of this group focus particularly on the biomedical abnormalities that occur in mental retardation.

JOSEPH B. MARTIN, M.D., Ph.D.
Chief of Service

Report of the Psychiatry Service

In 1978 the Psychiatry Service continued its emphasis on clinical service to the Hospital and community and expanded its efforts in education and training. This was a year of stable growth and consolidation.

After protracted negotiation, agreement was reached among the Psychiatry Service, the Hospital at large, and the Commonwealth of Massachusetts for a permanent contract to govern the relationship between MGH and the Erich Lindemann Mental Health Center.

New Advances

1) The Fellowship Program in Consultation/Liason Psychiatry has accepted three postgraduate fellows again this year. Fully-trained internists and psychiatrists are considered for this program. The fellows pursue research at the interface of medicine and psychiatry while providing service to areas of the Hospital which were formerly not so thoroughly covered.
2) The Program in Postgraduate Education has been expanded. In addition to the two-week comprehensive course in psychiatry, we have offered shorter courses in psychopharmacology, medical psychiatry, emergency psychiatry, and differential diagnosis. In addition to providing some revenue for expansion of our teaching, these courses provide an opportunity to bring together a wide spectrum of physicians from all areas of the country to participate in fruitful exchanges of ideas.

Clinical Services

1) Outpatient division: The ambulatory care of the Psychiatry Service is provided through six clinical subdivisions. The General Psychiatry Practice provides consultation and evaluation for new patients as well as ongoing short- and long-term individual and group therapy. The Psychopharmacology Clinic provides consultation and ongoing care for the large number of patients who require long-term monitoring of psychotropic medications. The Acute Psychiatric Service provides consultation to the emergency service and walk-in

patient care on a 24-hour basis. The Psychosomatic Clinic concerns itself with chronic pain, habit control, and phobias. The Alcohol Clinic and the Child Psychiatry Unit complete the ambulatory services.

2) Inpatient services: Bulfinch 7 is a 21-bed general psychiatry ward which concentrates on the treatment of patients with mixed medical and psychiatric difficulty and on those with complicated problems of differential diagnosis. The inpatient unit of the Erich Lindemann Mental Health Center is the sole state-funded facility for a catchment area of 172,000 people and so must maintain an active acute treatment and crisis intervention strategy.
3) Consultation, Liaison, and Psychosomatic Services: In the past year, special attention has been given to the diagnosis and management of psychosis in the critically ill. Patients in the surgical and respiratory intensive care units who develop major cognitive or behavioral disorders have been the special interest of the psychosomatic fellows.
4) Community Psychiatry: The Psychiatry Service has been active in coordinating its community-based teaching and mental health service components with primary health care delivery in the Harbor Mental Health and Mental Retardation Area. The Program to train post-residency psychiatrists in clinician-executive skills for leadership roles in community psychiatry is now in its fourth year and its four fellows work in Harbor Area neighborhood health centers. Community-based research into the interaction of health and mental health care in such primary care settings and studies of the psychological impact of the 1978 flood disaster are ongoing.

Research Activity

The Psychiatry Service continues to be involved in a wide spectrum of basic and clinical research.

1) Basic Research: The neurophysiology laboratory on Warren 6 is currently investigating anatomic and functional retinal afferent pathways to brainstem oculomoter areas.

   A search committee continues its deliberations toward finding a director of the psychiatric research laboratories, a position vacated by Dr. Seymour Kety.

2) Clinical Research: Each of the clinical units engages in research and outcome studies in its own area of expertise. The Psychosomatic Service continues its interest in stress and myocardial infarction. The Stanley Cobb Research Laboratories are currently engaged in studies of the psychobiology of depression and in the training of junior investigators in clinical research skills. The Acute Psychiatry Service has been investigating epidemiological correlates of dystonic reactions and continues its work in diagnostic features of delirium and the rapid treatment of acute psychosis.

Teaching

The first priority for our teaching efforts continues to be in the area of resident training. The quality and broad range of experience of each entering class of residents has been superb. Our program continues to be among the most highly sought after in the country. We consider the applications only of physicians who have had a minimum of one year of postgraduate training in general medicine.

Medical student teaching has expanded as well. In addition to our traditional commitment to Harvard Medical School, we have accepted 42 medical students from seven other universities. We continue our work with psychiatry training for residents in the primary care track of internal medicine.

The joint MGH/ELMHC Predoctoral Internship Training Program in Clinical/Community Psychology continues to grow and is in the process of developing a specialized training for minority psychologists of Hispanic-American descent. The training program has submitted an application for accreditation to the American Psychological Association.

Our postgraduate education program continues to grow. We provided five major postgraduate courses of three days to two weeks duration. More than 1,200 physicians from all areas of the country took part in these efforts.

Our service now publishes a newsletter with the title of "Biologic Therapies in Psychiatry." This publication, provided at a low cost to the psychiatric and medical community, now enjoys more than 1,000 subscribers. This service complements our ongoing activity in postgraduate education.

I should like to express my thanks to the Psychiatry staff, the residents and fellows, and the other services at MGH for their help and cooperation during the past year.

THOMAS P. HACKETT, M.D.
Chief of Service

Report of the Surgical Services

During 1978, the Surgical Services continued to provide outstanding health care while making major strides in education and research. Projects begun earlier were completed and others were initiated that have already led to improved patient services and advances in surgical therapy.

The Department's educational function encompasses teaching both for medical students and for participants in the MGH residency program. The Core Clinical Clerkship, directed by Dr. J. Gordon Scannell, offered Harvard Medical students two-mouth exposures to clinical surgery on the general wards, the Emergency Ward, and electives. The program depends heavily on the active cooperation of the resident staff and selected members of the visiting staff, who students participated in a one-month advanced course in surgery tailored to the students' special needs and interests.

With the Department of Medicine, we conducted the successful "Introduction to Clinical Medicine" course for 60 Harvard Medical School students. The course, coordinated for the Department of Surgery by Drs. Chiu-an Wang and John Head, was taught by members of the general surgical staff and subspecialty units, such as Urology, Orthopaedics, and Neurosurgery.

Twelve residents were selected for the surgical residency program, which continued under the excellent guidance of Dr. Leslie W. Ottinger. Of the twelve, three were graduated from Harvard Medical School and one each came from medical schools at the University of Alabama, University of Louisville, Cornell University, Southwestern University, the University of California, Columbia University, the University of Kansas, Johns Hopkins University, and from the Mayo School of Medicine. Of the ten residents completing the fifth year of our program, three entered the private practice of general surgery, one accepted an academic appointment in a department of general surgery, two entered fellowships in vascular surgery, and four began specialty training programs (one in plastic surgery and three in thoracic and cardiovascular surgery).

A stable census on the East and West Services reflected not only a strong commitment by the Surgical Visiting Staff, but also the continued active support of other Services of the Hospital, especially Internal Medicine and the Bunker Hill Health Center.

Under the direction of Dr. Marshall K. Bartlett, the MGH operating rooms served 24,472 patients in 1978, with about 30 percent of these being cared for in the Surgical Day Care Unit. The Jackson Wing was transformed into four new operating rooms and an enlarged recovery room, leading not only to improved patient flow through the operating room suite, but significantly decreasing the number of elective operations performed late in the day.

More than 81,000 acutely ill patients were seen in the Emergency Ward during 1978. The EW, under the leadership of Dr. Earle W. Wilkins, Jr., admitted 13,174 patients to the Hospital, or 47 percent of all MGH admissions. Despite this demanding patient population, Dr. Wilkins found time to edit the new **MGH Textbook of Emergency Medicine** with Drs. Ashby C. Moncure and James J. Dineen (Medicine). The book's 38 chapters by 54 authors make it the definitive work on managing illness and accidents encountered in the Emergency Ward.

The MGH also has continued its leadership role in providing patient care outside the doors of the Emergency Ward. Dr. Wilkins, who has served as Chairman of the Hospital Emergency Medical Services Committee of the 17-member Conference of Boston Teaching Hospitals, was appointed technical advisor for the New England Regional Division of Emergency Medical Services.

The Surgical Oncology Unit explored new frontiers in cancer treatment. Drs. Alfred M. Cohen and William C. Wood initiated and coordinated national trials of adjuvant chemotherapy for gastric carcinoma and malignant melanoma; protocols using adjuvant chemoimmunotherapy for colon and lung cancers were begun; and the Unit participated in a multidisciplinary protocol for pancreatic carcinoma. During 1978, work began on a totally implantable, refillable infusion pump for long-term chemotherapy. Laboratory studies on tumor-specific cell surface antigens in brain, colon, and breast cancers has continued, while a prospective trial on the serologic immunodiagnosis of brain tumors was initiated.

New efforts in the Transplantation Unit were again supervised by Dr. Paul S. Russell. The staff began initial studies of human pancreatic cells in the hopes of decreasing the incidence and morbidity of diabetes. Mortality for kidney transplant patients has also decreased, so that now children and adults can expect to live as long with transplant surgery as they would on hemodialysis alone.

Dr. Ronald A. Malt continued to guide the Division of Gastrointestinal Surgery, which has increasingly treated patients with complicated surgical management problems who have been referred from community hospitals. The Division is proud but saddened that Dr. Joseph E. Fischer left the MGH to become Chairman of the Department of Surgery at the University of Cincinnati. We are also pleased to announce that Dr. Grant V. Rodkey is the new President-Elect of the Massachusetts Medical Society.

Dr. Chiu-an Wang led the Division of Endocrine Surgery in another busy year. A new method for intraoperative diagnosis of the pathologic types of hyperparathyroidism, the Density Test, was developed this year at the MGH. The test, which can define more precisely the limits of an operation, has already been enthusiastically received at other large medical centers. Increasing numbers of patients continue to come to the MGH for surgical diagnosis and treatment of thyroid disease, and we anticipate that the demand for needle biopsy of the thyroid will continue to mount.

The Burn Service and the Shriners Burns Institute, directed by Dr. John F. Burke, continued as a referral unit for patients with extensive and complicated burns. New projects for 1978 included an extensive revision of the frozen skin bank, overseen by Dr. Conrado C. Bondoc, and an attempt to increase the number of skin donations. Dr. Glenn E. Behringer began an evaluation of stress ulcer using gastroscopic observations, and Dr. John M. Head continued his investigations into pulmonary inhalation burn injury. In an attempt to improve the clinical evaluation of the depth of burn injuries, Dr. William C. Quinby studied the used of infrared photography. Also, substantial progress was made in studies that have more clearly defined the various metabolic fuels needed after burn injuries.

Innovation continued as the keyword in the Plastic Surgical Unit, where Dr. John P. Remensnyder has led the staff in developing new ways to treat deformity, trauma, and disfigurement. In 1978, the Unit had special success with breast reconstruction following mastectomy and the use of compound muscle-skin flaps to repair large defects. Working with children at the Shriners Burns Institute, the Unit began developing techniques, using large chest and neck flaps, to remove facial scars to restore to patients a more normal appearance. Similar methods continued to be studied for managing deformities resulting from large resections of the head and neck region in cancer surgery. The Plastic Surgical Training Program, under the guidance of Dr. Michael B. Lewis, has expanded to provide experience in managing cleft lip and palate as well as other facial anomalies. Dr. James W. May, Jr., who established our Laboratory for Microvascular Research, has been teaching the surgical staff methods of joining tiny blood vessels and other small structures under microscopic control. The Laboratory, collaborating with the MGH Department of Orthopaedics, conducted a major research effort on the implantation of vascularized bone grafts. Also in 1978, the Laboratory for Microvascular Research administered the highly successful, first annual MGH Postgraduate Course in Microvascular Surgery.

Our Cardiac Surgical Unit, directed by Dr. Mortimer J. Buckley, was active in both the clinical and research areas. With more than 1,100 patients, almost all of whom had open heart surgery, we were able to train two full-time residents in addition to the six general surgery residents who rotated through the Unit. The large case load has created a valuable educational experience for those residents and for the 26 medical students who participated in our program. In conjunction with the Department of Anesthesia, the Unit has continued its research into factors influencing myocardial preservation. Studies of potassium arrest, cold, and pulsatile flow in the preservation of myocardium and peripheral organs were especially interesting in 1978. The addition to the staff of Drs. Frederick H. Levine and Cary W. Akins, both former residents of the Cardiac Surgical Unit, has mitigated our loss of Dr. Eldred D. Mundth, who became Professor and Chairman of Cardiothoracic Surgery at Philadelphia's Hahnemann Medical School, and Dr. M. Terry McEnany, who is now Professor of Surgery at Brown University in Providence. Unit members were recognized for their excellence in 1978: Dr. W. Gerald Austen served as President of the American Heart Association (AHA), Dr. A. John Erdmann III received an Established Investigator Award from the AHA, and Dr. Mortimer J. Buckley became Chairman-Elect of the Association's Cardiovascular Surgical Section.

The General Thoracic Surgical Unit continued to be vigorously active in pulmonary, esophageal, mediastinal, diaphragmatic, and especially airway surgery for which patients are referred from all over the United States and abroad. Educational activities flourished in 1978 with a cardiothoracic residency program, an elective in thoracic disease for medical students, and a fully subscribed Postgraduate Course in Thoracic Surgery.

Members of the Cardiac and Thoracic Units, Drs. W. Gerald Austen, Hermes C. Grillo, Willard M. Daggett, and J. Gordon Scannell served on the editorial boards of two thoracic surgical journals; Dr. Grillo has been named to the American Board of Thoracic Surgery for a six-year term; and Dr. Scannell has just completed a year as President of the American Association for Thoracic Surgery.

Again in 1978, the Surgical Services received support from other areas of the Hospital. I therefore wish not only to thank the Surgical Staff and the Surgical Resident Staff, but also to express my gratitude to the other Services at the MGH, the Department of Nursing, and the Administration for their continued cooperation.

W. GERALD AUSTEN, M.D.
Chief of the Surgical Services

Report of the Neurosurgical Service

The past year proved to be a stimulating and eventful period in the history of the Neurosurgical Service. Dr. Paul L. Kornblith, who has been at the Massachusetts General Hospital for the past 10 years, was recently appointed Chief of the Surgical Neurology section at the National Institute of Neurological and Communication Disorders and Stroke, marking a major achievement for him. He takes with him the best wishes of all his friends at this Hospital.

As evidence of our commitment to the training of academic surgeons, four of our residents went on to positions with major insititutions. Dr. Curtis N. Nelson became Assistant Professor of Neurosurgery at the University of Rochester. Dr. Lincoln F. Ramirez was appointed Assistant Professor of Neurosurgery at the University of Wisconsin. Drs. Eugene A. Quindlen and Barry H. Smith accompanied Dr. Kornblith to the National Institutes of Health.

Our residency training program remains strong. We continue to attract very promising young physicians into the program. The duration of training has been extended to six years after internship due partly to an increase in the official requirement of the American Board of Neurological Surgery to five years and to our wish to provide additional time for research training. In addition to the periods of clincial neurosurgery assigned to the residents, there are rotations devoted to neurology and neuroradiology and electives.

The Service promotes numerous activities to bolster clinical teaching and to provide postgraduate education to physicians on a regional and national basis. Last fall, our fourth postgraduate course was held during the third week of November. One hundred fifty persons from this country and abroad attended. A course devoted to microsurgical technique was given by Drs. Robert G. Ojemann and Robert M. Crowell. In addition, a monthly clinical conference for neurosurgeons in the New England region has been warmly received and provides the background for informal discussions of topical interest.

Several prominent neurosurgeons from this country visited the service during 1978 to serve as visiting professors on the ward service. These included Dr. Peter J. Janetta, Chairman of Neurosurgery, University of Pittsburgh; Dr. Steven M. Mahaley, University of North Carolina at Chapel Hill; Dr. Fred A. Simeone, University of Pennsylvania; and Dr. Charles G. Drake, University of Western Ontario. Dr. Drake was invited to deliver the third annual James C. White Lecture during his time here.

Several distinguished surgeons chose to spend their sabbatical time with us. Dr. Louis V. Amador was with us during the summer, finishing his major volume on pediatric neurosurgery, and Professor Claes von Essen from the University of Gothenburg is here for the year working on stroke research.

Members of the service have come together to develop clinical areas of special expertise. Drs. Ojemann and Crowell continue to develop the areas of vascular and tumor surgery of the brain. The Service's long-standing interest in the problems of pain, first established by Drs. White and Sweet, will continue under the direction of Dr. Charles E. Poletti. Drs. Raymond N. Kjellberg and Nicholas T. Zervas have sought to maintain a high level of interest in the management of pituitary tumors. Dr. Paul Chapman is actively engaged in strengthening pediatric neurosurgery at this Hospital and continues to expand his interests in pineal tumors.

The research efforts of the Service have flourished in the past year. Investigation of the problems of cerebral vascular disease has been expanded by groups under the direction of both Dr. Crowell and Dr. Zervas. Dr. Poletti has made important contributions in understanding the effect of the limbic system on specific pain pathways. Dr. Adelbert Ames, III, has extended his research concerning the effect of ischemia on brain neurons and was recently invited to attend an international symposium on ischemia in Moscow. Dr. Richard H. Masland has established his own laboratory to investigate the specific neurotransmitters involved in the communication between the various cell layers of the retina. Dr. Daniel A. Pollen's life-long interest in visual physiology has been rewarded by his appointment as Director of Research at the Barrows Neurological Institute in Phoenix, a position he will assume in July 1979. Dr. Chapman is working with Professor Eric Cosman from the Massachusetts Institute of Technology to develop a telemetric intracranial pressure sensing system that will be useful in recording pressure in postoperative patients and those with intracranial shunting devices. Dr. H. Thomas Ballantine, Jr. is actively involved with issues concerning medical ethics and governmental regulation, both on a state and national level. His experience with cingulotomy has led to heightened interest and, together with Dr. Suzanne Corkin from the Massachusetts Institute of Technology, has been able to demonstrate the utility of this procedure in the management of patients with intractable pain syndromes. Professor Emeritus William H. Sweet has met many commitments as guest lecturer and visiting professor over the past year and continues to devote himself to pain research.

NICHOLAS T. ZERVAS, M.D.
Chief of Service

Report of the Oral Surgical Service

Nineteen-seventy-eight was a busy, productive, and interesting year for the Oral Surgical Service. In July, Jeffrey D. Stone, D.M.D., M.D., completed his five year program and became Assistant Professor of Oral Surgery at Vanderbilt University. Rocco Addante, D.M.D., having finished three years of clinical training, returned to HMS to complete his medical school requirements before taking a general surgery residency.

At the same time, two new residents began training: one, Dr. Michael Hauser, a graduate of the B.U. School of Graduate Dentistry, is following the three year track; the other, Dr. Michelle Copeland, is in the five year, combined-degree program. Dr. Charles Bertolami, who had spent two years doing research, also returned to the Service as a second year resident. Dr. Bertolami completed all his requirements for the D. Med. Sci. degree, including acceptance of his thesis entitled "A Study of Wound Healing as a Developmental Phenomenon." Dr. Bertolami will receive the degree in 1979.

A part-time member of the visiting staff, Dr. David Keith, increased his committment to the department and is now one of the regular monthly "visits." Dr. Keith divides his time betwen research and teaching. He is now studying the effects of phenyltoin (Dilantin) on craniofacial development, especially cleft lip and cleft palate. It is noteworthy that Dr. Keith first came to the MGH in the exchange program of residents we had with King's College Hospital in London. He is a valuable addition to the hospital family.

In keeping with the philosophy of providing "one level of care," the Oral Surgery Service became "privatized," having formed the Oral Surgery Group Associates. The former "Service" patients are now private patients jointly cared for by the residents and a specific identified staff person. Since the Service was always closely monitored by a visiting surgeon, the change is more a semantic than substantive one.

Research activity has continued. Dr. Edward Seldin, whose interest is primarily in biomechanical research, has been a great help to the Department of Radiation Medicine. Dr.

Bruce Donoff's significant work in wound healing was recognized by being awarded a grant for three years by the NIH to study normal and abnormal wound healing.

Once again, the Service is pleased to have melded patient care successfully with teaching and research.

WALTER GURALNICK, D.M.D.
Chief of Service

Report of the Orthopaedic Service

In 1978, the Orthopaedic Service at the Massachusetts General Hospital has continued to strive to achieve its goals of providing high quality patient care; improving its educational activities; and enhancing its research activities in the field of musculoskeletal disease. Additions to the staff this year included Dr. Indong Oh, who will work with Dr. William Harris in the Hip and Implant Service; and Dr. Paul Curtiss, who has succeeded Dr. Thornton Brown as Editor of the **Journal Bone and Joint Surgery** and has joined us in a part-time capacity to work principally with the Harvard medical students. Dr. Curtiss, a distinguished orthopaedic educator and investigator, was formerly Chairman of the Orthopaedic Section in the Department of Surgery at Ohio State University. No other major changes occurred in staffing and there has been no alteration in physical facilities other than the increased space allotted in the operating room which has materially enhanced the Orthopaedic Service's abilities to care for clinical needs. Patient care continues to be the principal activity of the Orthopaedic Service. In 1978, 3,688 inpatients were admitted with a wide variety of diagnoses and 3,323 operative procedures were performed, many of them highly complex and requiring specialized equipment.

The various speciality units of the Orthopaedic Service continue to set the pace in this area. The Hip and Implant Service has devised new femoral and acetablulum components for total hip replacement which appear to have optimal design specifications and are likely to enhance the longevity of the replacement procedure. Work continues on the prevention of thromboembolism and the use of various agents including aspirin on a routine basis. The Sports Medicine Clinic has continued to enlarge and has established a rather enviable reputation among the local athletic facilities. A Runner's Clinic has been started and is quite successful.

The Pediatric Orthopaedic Service continues to provide comprehensive care to the Burnham patients as well as to the outreach clinics of the MGH and is actively engaged in clinical research in such diverse areas as cerebral palsy, genetic disorders, and fractures in children. Dr. Richard

Band, serving as the third Peabody Fellow, has performed creditable work in the laboratory in epiphyseal plate growth disturbances and is attempting to devise a technique for re-establishing epiphyseal growth after partial closure.

The Hand Unit of the Orthopaedic Service, under the direction of Richard J. Smith, M. D., continues to expand in areas of special interst, particularly including hand trauma, replantation of severed limbs, and bone and soft tissue tumors. Microvascular anastomosis techniques for free island pedicles have been established as a useful technique in covering skin defects, and this work has been materially enhanced by association with Dr. James May of the surgical and Plastic Services. The Rehabilitation Unit, under the direction of Dr. Robert Leffert, continues to maintain a high quality of care with patients with stroke, amputation, and spinal cord injury and has maintained its close association with the Massachusetts Rehabilitation Hospital. Drs. Stanley J. Grabias, Joseph S. Barr, Jr., Robert J. Boyd, and Donald S. Pierce continue to serve the community of back sufferers and are actively engaged in cooperative ventures with the Neurosurgical Service. The Tumor Service continues to treat benign and malignant bone tumors with special emphasis on "limb sparing" procedures, particularly using allograft replacement. In 1978, 15 allografts were inserted into patients and currently Dr. Yoshitane Hiki manages the bone bank which remains the prototype for such systems throughout the country.

Education continues to be a very active area of interst to the Orthopaedic Service at the MGH. Residents and medical students rotating through the Orthopaedic Service participate in the teaching program with eight conferences presented weekly ranging widely within the disciplines in the specialty. In 1978, 40 guests from outside the Hospital were invited to speak at the Grand Rounds or the conferences. The third annual Robert Bailey Osgood Lectureship was presented in 1978 by Jacqueline Perry, M.D., and we remain indebted to Mrs. Ellen Jennings for her philanthropic role in relation to this program. Numerous special programs covering a variety of disciplines and fields were also presented by the Orthopaedic Service. Members of the Orthopaedic staff were active participants in programs throughout the country, particularly in continuing medical educational efforts in conjuction with the American Academy of Orthopaedic Surgeons and other teaching organizations.

Members of the Orthopaedic staff at the MGH received some important honors throughout 1978. Dr. Thornton Brown became President of the American Orthopaedic Association and Dr. William Harris remained the Secretary of the organization. Dr. Michael Ehrlich remained the Secretary of the Orthopaedic Research Society and Dr. Richard Smith as Secretary of the American Society for Surgery of the Hand. Dr. William MacAusland was named second Vice President of the American Academy of Orthopadeic Surgeons and will in two years become President of that organization.

Orthopaedic research has continued to expand through 1978 with activity in a number of important areas. The effect of electrical fields on fractures has been analyzed in a group of patients by Dr. Inong Oh and Dr. Harris as part of a national study, and Dr. Harris and his group continue to study forces acting about the hip joint in conjunction with MIT. Studies of articular cartilage continue with special emphasis on metabolism of normal and osteoarthritic articular cartilage; enzyme activity in cartilage; effect of prostaglandins on articular cartilage; methods of cryopreservation for acticular cartilage transplantation; biochemical analysis of chondrosarcomas; isolation of messenger RNA from normal, osteoarthritic, and chondrosarcoma chondrocytes and determination of the protein products in the cell free system; and numerous additional pilot studies. The house officers at the MGH as well as its staff continue to perform clinical research and this year 12 projects were presented by house officers as fulfillment of their thesis requirement for graduation from the orthopaedic program.

The Orthopadeic Service takes pride in its clinical competence and recognizes with gratitude the contribution of the staff members who, despite their small number and heavy schedules, continue to provide high quality care and actively participate in the various educational and reserarch programs. We remain deeply indebted to our colleagues from other services who have aided us through the years in patient care, education, and reserach.

HENRY J. MANKIN, M.D.
Chief of Service

Report of the Urological Service

Since mid-1977 the Urological Service has been housed on the 10th floor of the George Robert White Building and the Bigelow Tower, with the offices of the Urological Associates (full-time staff members) adjacent to these two areas. This enhances not only clinical care but undergraduate and postgraduate training for our house officers, nurses, students, and other therapeutic support staff.

Patient care activities have been greatly facilitated by the cooperation of the Hospital Administration in establishing admission policies consonant with service needs. There has been dramatic improvement in this chronic problem area. In 1978, we established a Urodynamics Laboratory on White 10 and commenced urologic service to the Massachusetts Rehabilitation Hospital.

Our residency program has been enriched by the geographical integration of facilities. We continue to enjoy the support of the American Cancer Society Clinical Fellowship program for a resident to gain a six-month experience in the various aspects of urological neoplasm each year.

Undergraduate teaching activities continue to be a mutually rewarding experience. We have had many students on elective clerkships for periods up to six weeks from Harvard Medical School and training programs across the country.

The Urological Associates Group practice, involved in the care of patients housed on White 10, continues to be a viable activity. The dedication and cooperation of the members of our visiting staff is much appreciated.

Clinical research projects for the National Bladder Cancer Collaborative Group A continue to expand. In examining this chronic neoplastic diathesis, longitudinal studies have demonstrated the benefits of chemotherapy in low stage lesions. Current protocols include chemoprevention of superficial carcinoma with cis-retinoic acid, efficacy of cis-diamminodichloroplatinum (CDDP) in patients with metastatic disease, and the role of adjuvant CDDP following preoperative radiotherapy and cystectomy for invasive carcinoma.

Our work as an institutional member of The National Prostatic Cancer Project included studying various chemotherapeutic agents in patients with metastatic disease under the Protocols of the NPCP:

Diethylstilbestrol and/or estramustine phosphate

Cyclophosphamide cyclo, phosphamide with diethylstilbestrol, or cythosphosphamide with estramustine phosphate

Vincrinstine alone, or vincristine with estramustine phosphate

Hydroxyurea

Methyl CCNU

In our laboratories on Research 2, a basic research focused on characterization of androgen receptor in human prostatic tissues and demonstration of decreased receptor content in metastatic prostate cancer. We have benefited by the collaboration of Dr. Bernard Kliman and Mr. Robert McLaughlin of the Endocrine Unit. Studies on the correlation between lymphocyte cytotoxicity and tumor size, the use of a hematoporphyrin derivative as a tool to study bladder carcinoma both diagnostically and therapeutically, a study of the soft agar technique in chemotherapy on 3 MGH cell lines, development of a counterimmunoelectrophoreses technique in prostatic acid phosphatase, and the development of new tumor cell lines comprised our work in 1978.

GEORGE R. PROUT, JR., M.D.
Chief

Report of the Children's Service

(Burnham Division for Children)

As 1977 was a year of transition for the Children's Service, 1978 was a year for our assessment of where we were and a time for beginning to plan for where we would like to be. As we did these things, we had two very important occasions in mind. The first was 1979, declared the International Year of the Child by the United Nations. The second was 1986, the seventy-fifth anniversary of the Children's Service and the time we have set for ourselves to achieve significant improvement in the resources and facilities available for the care of children at the MGH.

In preparing for the former, we worked with our colleagues in other university-related pediatric facilities to prepare plans for a respite house for children and parents in the Greater Boston area. In regard to the second, we have begun to develop a carefully documented case for the need for new physical facilities for the Children's Service.

We were fortunate in making several new appointments this year. Together with the Psychiatry Service, we have made significant gains in preparing for the appointment of a Chief of Child Psychiatry who will provide a strong liaison between the Children's Service and the Psychiatry Service. Dr. Andrew D. Guthrie, Jr., has accepted our offer to head adolescent programs for the Children's Service; in addition, he will continue to be the Chief of Pediatrics at the MGH-Chelsea Health Center because the positions are complementary. As of this writing we anticipate that there will be two new and capable young people joining Dr. Guthrie and Drs. Sarah J. Richards and Joan W. Barkin at Chelsea.

Management for the Children's Service was significantly strengthened by the addition of Ms. Nancy Payne, who will work with the Chief of the Service on all management issues.

We assisted the North End Health Center in recruiting Dr. Terry Menke to head pediatric services there. Though that neighborhood health center is corporately separate, the professionals there and here feel a kinship and believe that this informal relationship will be a mutually beneficial one. Dr. Robert M. Meyer, last year's Chief Resident, joined the primary care teams at the MGH-Bunker Hill Health Center while retaining a role in Dr. Ronald R. Benz's Pediatric Ambulatory Center. In doing so, Dr. Meyer joined Drs. Leo B. Burgin and Susan A. DeMuth, the group headed by Dr. Catherine H. Beyer.

Our activities in primary care were extended through the leadership efforts of Dr. Thomas C. Peebles and all of the heads of the various primary care units associated with the Children's Service who presented a weekend long postgraduate program for primary care physicians, nurses, and other health professionals. More than 173 individuals attended this course which the students believed was outstanding.

1978 brought to the close a very important phase in the development of the intensive care programs on the Children's Service. Dr. Daniel C. Shannon has elected to accept directorship of the Pulmonary Unit of the Children's Service and has stepped down from leadership of the Intensive Care Unit of the sixth floor of the Vincent/Burnham Building. He will be replaced by Dr. David Todres. Dr. Todres will be joined by Dr. Joseph R. Custer who is trained in pediatrics, neonatology, and intensive care, and by Dr. Mark A. Rockoff, who is qualified in pediatrics, anesthesiology, and neuroanesthesiology.

Dr. Richard W. Erbe and Dr. Wayne A. Miller have developed a prenatal genetics screening and counselling program which provided service to over 600 patients in its first year of operation.

Dr. Rudolph L. Leibel, a member of the staff of the Children's Service who was Associate Director of the Cambridge Hospital, has taken a leave of absence in order to pursue studies of obesity with Dr. Hirsch at the Rockefeller University

A decision has been made to recruit an individual who has clinical and investigative strength in neuroendocrinology to further develop our collaboration with the Neurology Service. In doing so we can capitalize on the strength brought by Dr. Joseph B. Martin as the new Bullard Professor and Chief of the Neurology Service.

The services offered in the Burnham division continue to be highly utilized. Indeed, we were happy to note that for 1978 they were utilized at a rate in excess of the budgeted census and student and resident interest in the service continues at a high level.

Groups with regulatory and planning responsibilities also continue to have very high interest in the Children's Service and we are working energetically with the administration of the Hospital and with our colleagues of other university-related pediatric facilities in order to productively cooperate with those who are charged with such responsibilities. These efforts currently include an HSA IV and HCMB sponsored study of hospital services provided to children in HSA IV; establishment of new state standards for hospitals which are to provide care to children; and development of a state plan for hospital care.

In closing, may I take this opportunity to urge the Hospital family to note the significance of the United Nations having declared 1979 the International Year of the Child with its purpose being to cause nations to act to meet the as yet great and unmet needs of infants and children; the Children's Service is committed to provide information to you so that you might become informed about this important endeavor.

DONALD N. MEDEARIS, JR., M.D.
Chief, Children's Service

Report of the Department of Pathology

In 1978 reconstruction on the second and third floors of the Warren Building was completed. This was the last phase in a comprehensive program of expansion and renovation of the diagnostic and research facilities of the Department, planning for which began in 1974. The Department is grateful to Walsh Brothers, Inc., their sunbcontractors, and to the members of the MGH Maintenance Department who carried out the reconstruction with the least possible disruption of our daily activities. The new facilities are already fully occupied. I believe the need for further expansion and renovation will become pressing withing the next several years.

In August 1978, Mr. Myle J. Holley, III, Director of Diagnostic Support Services, became the administrative officer responsible for the Department, succeeding Mr. Delanson Y. Hopkins, who continues in his role as Director of Operations. We are particularly indebted to Mr. Hopkins for his expert help and invaluable support during the past four years, during which extensive reorganization of the Department occurred.

There were four new staff appointments in 1978: Drs. John T. Fallon, Stephen J. Galli, George M. Kleinman, and Joan R. Kumar. Dr. Fallon is an expert in cardiac pathology and supervises the review of cardiac specimens from the adult autopsy service. He has introduced a histochemical technique that makes possible the recognition of early myocardial infarcts at postmortem examination. Dr. Galli's major activities are in research; he is engaged in studies on the functions of basophils in allergic reactions, on the role of basophils in tumor immunity, and on mechanisms of human and mouse first set skin allograft rejection. He is supported by a National Research Service Award from the National Cancer Institute. Dr. Kleinman has been appointed to the Neuropathology Unit, thus providing Dr. E. P. Richardson with much needed staff assistance. Dr. Kleinman has expanded the diagnostic capabilities of the unit through the use of histochemical techniques for the study of neuromuscular disease. Dr. Kumar's major MGH appointment is in the Blood Transfusion Service, where she is Assistant Director. She is also active in the training of pathology residents and shares with Dr. Edgar Taft the responsibility for supervising the clincial pathology training program. Dr. Kilmer S. McCully resigned in December 1978.

The diagnostic work load of the Department increased slightly in the past year. In the fiscal year ending September 30, 1978, the Cytology Laboratory processed 28,815 specimens, an increase of 559 over the previous 12 months. The Cytogenetics Laboratory completed a record year in 1978, receiving 1,272 specimens, 556 of which were amniotic fluid cell samples processed in collaboration with the Prenatal Laboratory of the Genetics Unit. The diagnostic branch of the Immunopathology Unit was very active in 1978. One hundred renal biopsies were processed for light and immunoflourescence microscopy, and 93 were processed for electron microscopy. Seven hundred twelve serum samples were analyzed for immune complexes by the Raji cell assay and 48 serum samples were assayed for anti-glomerular basement membrane antibodies by indirect immunofluorescence and by a solid phase radioimmunoassay developed by Dr. Robert B. Colvin. An immunofluorescence test for diagnosing herpes encephalitis in brain biopsies was introduced. In the 22 samples studied, all 10 that were positive by immunoflourescence were positive by viral cultures. The immunoflourescence test is rapid and results can be obtained within two hours of the time of the biopsy, which enables anti-viral therapy to be initiated. The number of surgical pathology specimens remained essentially unchanged at approximately 28,000. There were 604 autopsies performed in 1978 compared with 754 in 1977 and 671 in 1976. Despite the general decline in the autopsy rate, the percentages actually increased on certain services; for example on the pediatric service, where there was a 17 percent rise.

The Experimental Pathology Laboratory in the Shriners Burns Institute, which is directed by Dr. Robert L. Trelstad, purchased and installed a new scanning electron microscope coupled with an X-ray energy spectrometer in the summer of 1978. In addition to providing high resolution scanning electron micrographs, the instrument is capable of producing qualitative and semi-quantitative analysis of tissues for all elements with an atomic number of 10 or greater, and can localize with a resolution of less than one micron the position of such elements within tissue sections. The instrument has already been used for the identification of thorium, iron, and talc containing particulate matter in tissues derived from patients with tumors and pulmonary lesions.

Dr. Austin L. Vickery was honored this year by being the recipient of a Visiting Professorship to Japan, sponsored by the Japanese Society for the Promotion of Science. Dr. Haruo Sugano, Director of the Cancer Institute of Japan, was his host and head of a group of Japanese pathologists supporting his selection.

Dr. E.P. Richardson served as Visiting Professor in the Department of Neuropathology at the University of Western Australia, Perth, for a three month period in late 1977 and early 1978.

In October, Dr. Martin C. Mihm, Jr., was the principal speaker and discussant of cases at the Symposium in the 29th Annual Meeting of the Central Japan Dermatological Society held in Kanazawa, Japan. He was Visiting Professor at Kobe University, Seminar Discussant at Kyoto University, Honorary Lecturer to the Tokyo Professors of Dermatology, and held a two day symposium for Dermatology and Pathology Residents in Tokyo under the sponsorship of the University of Tokyo and the Tokyo Teishin Hospital.

Dr. Stanley J. Robboy was invited to organize a symposium on the ‘‘Pathology of Estrogenic and Progestational Drugs’’ for the XII World Congress of the International Academy of Pathology held in Jerusalem, Israel. Drs. William Welch, Jaime Prat, and Stanley J. Robboy were invited to organize a course on abnormal sexual development for the American Society of Clinical Pathology. Dr. John Long was invited to organize in collaboration with Dr. Costan W. Berard a course on the Pathology of Lymph Nodes for the International Academy of Pathology.

The Department expanded its post-graduate medical activities, introducing two new courses, one entitled ‘Gynecologic and Obstetrical Pathology,’’ directed by Drs. Stanley J. Robboy, Robert E. Scully, and Shirley Driscoll, and another on ‘‘Recent Advances in Surgical Pathology,’’ directed by Drs. Robert T. McCluskey, Robert E. Scully, and

Austin L. Vickery; a majority of the staff participated in the latter course. Both courses were well received and will be offered again next year.

The research activities of the Department are summarized in the Annual MGH Research Report.

ROBERT T. McCLUSKEY, M.D.
Chief, Department of Pathology

Report of the Department of Radiation Medicine

The level of clinical activity has continued to increase. The number of new patients seen by the department in the calendar year was 1,597. This represents an 11% increase over the preceding year. In addition to the number of new patients, the department has cared for 415 patients treated previously. Further, 73 interstitial-intracavitary therapy procedures were performed, and 2,079 simulations were completed during this same year. Our actual clinical work load over the preceding year increased by an average of 15%.

The department has embarked upon the investigation of the role of intraoperative electron beam therapy in the treatment of selected problem patients. The basic concept here is that the affected area would be exposed at surgery and directly irradiated by electron beam technique with normal tissues judged uninvolved by tumor displaced and hence not irradiated. Specifically, the diseased area would be irradiated by direct appositional electron beam fields using one of the electron beam energies from our 35MeV linear accelerator. Because of the sharply defined range or depth of penetration of the electron beam, the irradiation of tissues deep to the tumor would be minimal. To date 14 patients have been treated, and the diagnoses of these patients have been: metastatic disease to the pelvic wall (3); pancreas (3); soft tissue sarcoma (5); and colo-rectal region (3). The radiation dose levels have been in the range of 1000-2500 rad, depending upon the extent to which the intraoperative dose is supplemented by fractionalized external beam photon technique. The electron energies utilized in these patients have varied from 9 to 29 MeV. This initial study has been possible because of the wholehearted cooperation and support of the Departments of Surgery, Anesthesia, Nursing, and of the Administration. For the effort of the Department of Radiation Medicine, special recognition is given to the work of the radiation physicists, radiation therapy technicians, and engineers. That these 14 procedures have been straightforward and conducted according to plan is a credit to the intensive, multidisciplinary planning and organization of each detail of the entire procedure.

For the intraoperative electron beam therapy, the first step is the surgical exposure in the operating room suites on the third floor. Following exposure, definition of the volume of tissue to be treated, selection of appropriate electron beam cones, decision about field collimation and any compensation required, the patient is transported to the Ground Floor. There, the patient is positioned under the 35MeV linear accelerator. Physiologic and anesthetic monitoring systems are connected, and the radiation treatment administered. For the period of treatment the patients have been switched to respiration of 100% oxygen. Following the irradiation, the patients have either been returned to the O.R. suite for closure or the closure has been performed in the therapy room. There have been no complications of significant difficulty in the procedure of bringing the patient to or from the Cox Ground Floor. In particular, no infections have been encountered among these patients. In preparation for the intraoperative procedure, the room has been cleaned and prepared according to the meticulously outlined protocol the night preceding the procedure. The therapy room is held in isolation until the patient arrives from the O.R. This means that radiations have been performed between 10 a.m. and 12 p.m., and the room has thus been cleared and ready for institution of the conventional external beam therapy by 11 a.m. to 2 p.m. In order to accommodate the work load of the patients on the 35MeV unit, several patients have been transferred for treatment on one of the 18MeV linear accelerators. This has meant a very high level of cooperation and support by the radiation therapy technicians. In fact of the 14 days only 2 patients have missed the planned conventional photon therapy because of the time involved by the intraoperative procedure.

Clearly, we are too early in this study to make any assessment of the clinical efficacy of the procedure. However, to date there is no instance of tumor regrowth in the irradiated site. Our hope is that we will be able to continue the study and in the not too distant future begin to make plans for a specific protocol for evaluation in a quantitative sense of the efficacy of this procedure. We are at this time analyzing the potential for having an intraoperative radiation therapy capability in the O.R. area.

With respect to the proton beam therapy, we now have a handsome, modern examining area, patient waiting area, and physician office area at the Harvard Cyclotron. Further, Pat McNulty, R.N., is at the cyclotron at all times while proton therapy is ongoing. This has been a very important asset to the expanding program. Our patient load is now up considerably as we do have access to the beam on a full-time basis. Approximately 4-10 patients are being treated per day with average around 6. To date 115 patients have been treated by proton therapy beam techniques. Most of these are being treated by combined modality external beam techniques. The number of patients treated for each of the major disease categories are: choroidal melanoma, 22; prostate, 43; colorectal, 12; bone and soft tissue, 12; head and neck tumors, 3; and gliomas, 7.

We have just recently begun a serious effort in collaboration with Dr. C. C. Wang to evaluate the efficacy of proton beam therapy in the treatment of head and neck lesions. Three patients have completed their treatment for squamous cell carcinoma of floor of mouth. This will be expanded to include other sites in the oral cavity, oral and hypopharynx.

HERMAN D. SUIT, M.D.
Chief, Department of Radiation Medicine

Report of the Department of Radiology

Important changes took place in the Department of Radiology during 1978. The Division of Nuclear Medicine has moved to occupy its new quarters following renovation of the space vacated by Radiation Medicine and the Tumor Clinic. Pediatric Radiology is in the process of moving at the present time and will also occupy space in the Tumor Clinic area most convenient to the Burnham Children's Division. Genitourinary Radiology has been consolidated on Baker 2 both for its standard and specialized procedures. These changes will help in correcting our deficiencies in patient care. There is still a great need for adequate waiting space for outpatients as well as inpatients.

In Nuclear Medicine, directed by Dr. William Strauss, the most important developments in addition to the space reallocation in 1978 were the establishment of a Training Program in Nuclear Radiology and approval and support of a Research Training Program in Nuclear Cardiology supported by the National Heart Institute. The application of Nuclear Medicine technology to the investigation of the cardiac patient, both on an outpatient basis following exercise and in the acute care units using portable equipment, is undergoing spectacular growth because of the ability to evaluate certain parameters of cardiac function in a noninvasive manner. The addition of Dr. Mary Hauser to the staff of Nuclear Medicine has strengthened this Division because of her intense interest in excellent patient care.

The Gastrointestinal Radiology Section, directed by Dr. Joseph Ferrucci, which also includes ultrasound and computed body tomography, continues to grow. This is owing to the importance which ultrasound is gaining in the diagnsosis of abdominal organ diseases.

The continuous progress being made in the resolving power of ultrasonic equipment is partly responsible for this progress. It is now possible to visualize structures which were never seen before. During this year, the collaborative research project with the EMI Corporation on computed body tomography equipment made considerable progress and resulted in two publications dealing with the value of computed body tomography in the management of a number of diseases according to a protocol. It was definitely demonstrated by this clinical research project that computed body tomography is a very valuable diagnostic procedure and must be made available to our patients. Based on this data, a Certificate of Need application has been made and final decision from the Public Health Council is now pending.

In the Vascular Radiology area, directed by Christos Athanasoulis, the developments of technique and equipment to produce intraluminal dilation of stenotic arterial lesions continues and looks very promising.

In the Neuroradiology Section, Dr. Glenn Roberson resigned as Director of this Section to assume the Chairmanship of the Department of Radiology at Albany Medical College. Dr. Kenneth Davis has been appointed as Acting Head of this Division and has initiated a number of changes in the training program which will tend to strengthen it.

The various sections of the Department dealing with outpatient work were combined into a single group. Dr. James Rhea has been appointed to direct this new Ambulatory Radiology Group which includes, in addition to the Emergency Radiology and the Baker Units, the Bunker Hill Health Center and the Chelsea Radiology facility. This has already resulted in considerable improvement in our ability to offer radiologic service to outpatients.

Again, my heartfelt thanks go to the staff, the paramedical personnel in the Department of Radiology, and the Hospital Administration for their continued loyalty and support in our efforts to achieve and maintain optimum radiological care.

JUAN M. TAVERAS, M.D.
Radiologist-in-Chief

Report of the Medical Station at Logan Airport

The health of an international airport community, with its numerous employees engaged in many different and often highly skilled occupations which make aerotransportation of people and cargo possible, presents many of the same problems which assault the health status of all other American communities. Obesity, tobacco smoking, excessive drinking, noise impaction, and job tension with all of its stress complications are as common here as elsewhere. There is the added fact that people here live and breathe in an atmosphere contaminated with petroleum vapors and the many products of petroleum combustion even though the prevailing winds help reduce concentrations. The long range implications of this environmental problem are not yet known.

Patient attendance at the Medical Station continues to offer the caretaker a curious admixture of preventive and curative therapies. The specific international regulations relative to the quarantinable infections of cholera, plague, smallpox, and yellow fever change depending upon the extent and location of new outbreaks. This requires constant world awareness by the entire staff. Exact individual itineraries must also be considered since certain countries require vaccination against these infections or others if a traveler arrives from a country unexpectedly infected with a serious outbreak of infectious disease. Thus, a large amount of staff time is spent in client instruction and orientation for which no reasonable compensation can be introduced without alienation of the consumer. The background issue of whether health education and advice is governmental rather than an individual responsibility is often raised. The question with its philosophical, moral, and legal considerations remains unanswered.

Direct patient care is our major concern. Outpatients are primarily employees with the statistically frequent problems familiar to all caretakers. A close liaison is maintained with the Emergency Ward of the Hospital and with the Logan Fire Department members, many of whom are fully-trained Emergency Medical Technicians who respond more than 600 times per year to the accidents and sudden illnesses which occur in travelers here. Over 13 million passengers now pass through Logan International Airport annually.

The graduate of the 81-hour basic course designated by the Department of Transportation (DOT), identified as an Emergency Medical Technician (EMT), has been specifically trained in the initial care of the victim of an accident or related emergency. The EMT is able to extricate the injured, splint fractures, administer oxygen, initiate and maintain external heart massage and cardiopulmonary resuscitation, and control vigorous bleeding. The EMT is not allowed to use drugs, give injections, administer intravenous fluids or perform a tracheotomy. The role of the EMT is defined here since local and state-wide provisions and increasing federal commitment to Emergency Medical Services (EMS) communications networks, ambulance units, and trained personnel continues to enlarge and will have a changing impact on our Emergency Ward and on certain functional aspects of this facility.

Preparedness for any major catastrophe continues to be a priority which requires constant background attention. Another disaster drill was held here this year. Response time for the medical support personnel was the chief factor studied. To assure the accuracy of response, a medical action flow-chart was created and is prominently displayed to assist emergency mobilization. Also, a wallet-size disaster check list was prepared and distributed. This concisely summarizes the urgent duties of the first responders who must assign caretakers promptly to one of the following five teams: medical communication and command, rescue, on-site triage, ambulance and secondary triage.

Within the Medical Station there have been several interesting projects. With the aid of a volunteer, our accumulated audiometric data has been assembled and initially analyzed in order to develop a more cogent hearing conservation program. This work will continue. Even though the use of ear plugs is encouraged, individual compliance varies and motivation tends to decline with time. Regular audiometric examinations can be used to enhance use of protective devices. A control study on long-distance (San Francisco) telephone transmission of electrocardiograms with immediate computerized interpretation showed nicely how much proper use of communications technology can enhance caretaking. In a different demonstration, the use of satellite transmission in telemedicine was carried out. A simulated aircraft disaster was enacted in Maryland. A slow scan television image from the accident site to the Medical Station traveled to a communications satellite 26,000 miles above Hawaii, to a relay station in North Carolina, back to the satellite, and thence to a television set at the Medical Station. Thus, total distance was 96,000 miles. Triage of several simulated patients via standard satellite two-way voice exchange resulted. Finally, the inhospital patient health education program regularly shown on closed television is transmitted daily to the reception area at the Medical Station for the benefit of waiting patients.

Work on the PROVE (Problem Oriented Visually Enriched) Medical Record has continued, and nearly 1,000 charts using this first version of the new record format have been completed. Much has been learned about acceptance of change as a phenomenon affecting caretaking personnel. The planned gradual emergence of this new type of record keeping will continue next year.

KENNETH T. BIRD, M.D.
Director

Report of the MGH-Bunker Hill Health Center

The Bunker Hill Health Center of the Massachusetts General Hospital has been in operation since it officially opened its doors in 1968. The health center continues to offer a wide range of services to the Charlestown population as well as to contiguous communities. The emphasis of the health care services at the center is oriented towards prevention and health maintenance. In keeping with the Hospital's goal for a "single standard of health care," the health center physicians have a 24-hour, seven-day a week coverage system. They also participate in the care of health center patients hospitalized at the MGH.

The Pediatric Unit, including its physicians and nurse practitioners, saw 9,168 visits during 1978. They continued their commitment to school health. The nursing staff assigned by the Department of Health and Hospitals has maintained a very successful screening program at the two Charlestown parochial schools. The pediatric program continues to expand and to innovate, and it looks with justified pride upon its accomplishments in screening and immunizations. Under the leadership of Dr. Catherine Beyer, the pediatric effort will continue to promote case finding, prevention, and the assessment of growth and development as well as to maintain a high level of pediatric health care. Dr. Rob Meyer, formerly Chief Resident on the MGH Children's Services, has joined the pediatric group practice at the health center. An adolescent clinic has beeen developed. This operates on Monday evenings. Ms. Maffie, R.N., has been very active with the Charlestown Police Department in developing outreach programs to the youth of the town.

At the health center, nurses are assigned to Obs/GYN, mental health, pediatrics, adult medicine, and school health, and are supported from a variety of sources including the MGH (3), Department of Health and Hospitals (3), and Erich Lindemann Mental Health Center (2). All of the nurses are actively engaged in preventively oriented programs and community education activities. They maintain liaison relationships with a variety of community agencies, such as VNA, Headstart, and public school nursing. In the parochial schools, the pediatric nurses have participated with core evaluations under Chapter 766 and have developed and implemented hospital and home visiting of newborn children. Ms. Jodice, R.N. assigned to adult medicine by the Department of Health and Hospitals has evolved a close working relationship with elderly groups in town, not only for educational purposes but also for the service needs of these people. She has also continued work with hypertensive screening and outreach to local industry. The nursing service continues to staff the health services at the Charlestown DYS Unit for delinquent minors. The health center assistants (3) have continued as stalwarts of the health center. As they continue to provide support and assistance throughout the health center, their roles are being expanded to include more services.

Adult Medicine remains the busiest service in the health center, accounting for about 25 percent of all the visits to the health center. During 1978 there were 12,653 visits to adult medicine. The unit continues to operate with a strong commitment to health maintenance; at the same time, stronger ties with the MGH Primary Care Program for service and teaching have been developed. The teaching of medical students continues as a high priority. Members of the unit have worked with others in the health center to develop a medical recores committee and medical record audit system. New collaborative ventures are underway with the Bunker Hill Community College.

The Community Mental Health/Social Service Unit in 1978 had 10,582 visits. About 70 percent of these visits were for child-related problems. The preventively oriented program offered included an expanded therpeutic camping program for children at risk of becoming delinquent and a core evaluation program under Chapter 766. In close collaboration with the Erich Lindemann Mental Health Center, a day treatment program for adults continues. The reorganized adult service program continues to expand into the community with special emphasis with the elderly. Ward Cromer, Ph.D., has been appointed Unit Chief replacing Alan Jacobson, M.D., who left in September 1978.

The Dental Health Service of the health center provides comprehensive dental services to children and adults, including preventive, emergency diagnostic, and restorative services. Included are prophylaxis, scaling, dental health education, fillings, root canals, periodontics, crown, bridges, pedodontics, interceptive othrodontics, dentures, partials, and extractions. There were 8,814 visits this year with 55 percent under age 21. The dental unit is focusing much attention on the youth of Charlestown. This includes screening in local parochial schools, headstart, and other groups as well as the implementation of weekly flouride rinse programs.

Nutrition Unit has expanded its primary care counseling program. During 1977-1978 there were 9,668 visits to nutrition unit of which 70 percent were child/maternity related. The nutrition staff continues to be active in MGH teaching program, research (grant from American Dietetic Issue to test a protocol dealing with cost/benefits of primary nutrition counseling), and numerous community activities. The unit continues with the Women, Infant, and Children Grant to help further good nutritional health for pregnant women and their children under five years.

In keeping with the goal of building strong linkages with the hospital based units, the X-ray Department has assumed responsibility for the upgrading of x-ray services. The Speech and Language Program has become firmly linked to its parent department at the MGH. Plans are currently being made to tie some of our other ''unattached'' services, such as Occupational Therapy and Physical Therapy, to the parent institution.

Other exciting developments at the health center include expansion of the Consumer Advisory Board, plans for renovation of the facility, the development of monthly publication, and the receipt of a grant from the Sugarman Foundation for medical student teaching space. The Nona Cullinane Fund has been expanded through the generosity of the Frank Brennans of Jackson Hole, Wyoming.

1977-78 saw numerous administrative changes. Dr. Sweet took on the additional responsibility of being Medical Director for the Chelsea Health Center. Dr. Catherine Beyer was named Associate Medical Director of Bunker Hill Health Center. Mr. Steven Booth has assumed the task of being Business Manager for both health centers, with Linda Panarese and Robert Tonner, Unit Managers for Bunker Hill Health Center and Chelsea Health Center, respectively, reporting to him.

These administrative moves will provide medical and managerial coherence to the neighborhood health center group in the Ambulatory Care Division of the MGH.

With an improved data collection system developed by Dr. Margaret Olendzki, head of Research of ACD, we hope to develop more research and evaluation projects over the ensuing months.

ROGER H. SWEET, M.D.
Medical Director
Neighborhood Health Center Group
STEVEN H. BOOTH
Business Manager
MGH-Health Centers

Report of the MGH-Chelsea Health Center

The Chelsea Health Center's retrospective of 1978 shows a series of transitions, some of which are still progressing. December marked the fifth anniversary of our residence in Remick House and the Public Health Council's approval to move into the new wing of the former Chelsea Memorial Hospital. The closing of that institution marks the completion of one type of community health service and, pending the Council's final approval, the initiation of another model: an ambulatory care setting integrated with an emergency room and overnight ward for patients with low technology needs.

The Health Center's program continues to be coordinated between all disciplines as we interact with the community and they with us. Chelsea residents have found the Prenatal Clinic an excellent introduction to the health care system. It provides a natural flow through the neonatal, well child, and episodic care provided by the Pediatric Service.

A recently established Women, Infants, and Children (WIC) Program, which expands the activities of the Health Center's nutritionist, will enhance our care of Chelsea's prenatal women and infants. Children have also been aided by the Center's outreach programs which provide medical, dental, and nutritional screening for preschoolers in day care programs and those enrolled in public and private schools. The dental team continues to emphasize pediatric dentistry and hygiene although it has managed adult emergency care as well. The Lead Screening Clinic is regularly evaluating children at risk, many of whom are followed by the pediatric team.

Teenagers are receiving increasing attention through the Health Center's adolescent clinic and high school program which provide this traditionally neglected group with a nonthreatening approach to health care. The pediatric and mental health teams are addressing the psycho-socially and medically complex situation of the pregnant adolescent which the Center is caring for in increasing numbers.

Parents and children having difficulties in relating with each other continue to receive attention through our Community Mental Health team's programs. Combined parents and toddlers' groups, individual counseling, and children's play therapy are ongoing measures of treatment. Referrals and consultations between adult, pediatric, and emergency room staff have improved the screening process for Child Care Project cases.

Judging by the number of patient visits, the Chelsea Health Center has received steadily increasing community acceptance. Engaging the large number of Spanish residents has been a serious concern which has been fortunately aided by a committed bilingual staff. To augment this, we have added a Spanish speaking social worker and a pediatrician during the past year. We are now embarking upon a survey of the Spanish elderly's needs which will become part of the regular activities of our coordinator for the eldery. Our weekly outreach clinic in Chelsea's elderly housing complex has been very successful and we will be establishing a second one in the coming year.

The Hypertension Work-Site Program has continued its screening of employees for local companies. Those who are identified and willing to participate are tracked by the adult team. The team is currently evolving ways to integrate home care, hospice care, and the Foster Home Care programs into our expanding network of primary and secondary care services. A recent development calls for one of the Health Center's Adult Nurse Practitioners to work in conjunction with the Boston Visiting Nurse Association. This will provide greater continuity of care for patients discharged from both the Massachusetts General Hospital and Chelsea Unit's inpatient and emergency wards.

The emergency room and overnight ward, supported by the laboratory, radiology, nutritional, and dental services, have provided a comprehensive introduction to our system and an effective medium for continuity of care. Nursing, which has been the mainstay for these units, has also coordinated itself with Health Center operations. Their efficiency has been furthered by the addition of a social worker who has assisted with agency placements, crisis counseling, and child care cases.

Looking forward to 1979, the pediatric staff anticipates the continuance of their resident training program which was well received this past year. July will see the initiation of internal medicine's residency program in primary care. The teaching aspect, our continuing consultation and collaboration with other agencies in organizing programs, together with the planning of the physical plant renovations of our new home, all point forward to an exciting model for comprehensive health care delivery.

ROGER SWEET, M.D.
Medical Director
ROBERT TONNER
Unit Manager

SLATE FOR TRUSTEES & OFFICERS OF THE VINCENT MEMORIAL HOSPITAL FOR THE YEAR 1978

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President, The Vincent Club

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James H. Nelson, Jr., M.D., *Chief of Staff*

Howard Ulfelder, M.D., *Consulting Visiting Gynecologist*

Gynecologists

Thomas H. Green, Jr., M.D.
Francis M. Ingersoll, M.D.
Janet W. McArthur, M.D.
George S. Richardson, M.D.

Assistant Gynecologists

Ann B. Barnes, M.D.
Inese Z. Beitins, M.D.
Thomas D. Durant, M.D.

Assistants in Gynecology

David S. Chapin, M.D.
Arlan F. Fuller, Jr., M.D.
James B. Hall, M.D.
Wayne A. Miller, M.D.
Linda S. Morgan, M.D.
Najmosama Nikrui, M.D.

Clinical Associate in Gynecology
Bartlett H. Stone, M.D.

Clinical Assistant in Gynecology
Francis H. Boudreau, M.D.

Assistants in Biochemistry (Gynecology)

Thomas M. Badger, Ph.D.	David T. MacLaughlin, Ph.D.

Associate Biologist in Gynecology
Leona Zacharias, Ph.D.

Consultants in Gynecology

John Newell, M.D.	Kenneth J. Ryan, M.D.
Langdon Parsons, M.D.	Judson Smith, M.D.
John Rock, M.D.	Benjamin Tenney, M.D.

Miss Gellestrina DiMaggio, RN
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Mrs. Joseph Stukas, RN
Nursing Supervisor

Miss J.A. Newell, RN
Miss R.A. Shanks, RN
Head Nurses

Mrs. John Zagata, RN
Psychiatric Nurse Clinician

Miss Elizabeth Davis, RN
Unit Teacher

Mrs. Ruth Guarante
Head Nurse, Gynecology Clinic

Ellen Feldman, M.S.W.
Caseworker

Betty Bawdeker
Case Assistant

Report of the Vincent Memorial Hospital Board of Managers

This past year the Board of Managers has been engaged in a variety of activities. Much has been learned about the services of the Hospital, its accomplishments, and its plans for the future.

Preceding our September Board meeting, morning coffee was served to the doctors attending the Postgraduate Course in Gynecology. Fifty doctors from our own staff, the Masachusetts General Hospital, and the Harvard Medical School acted as the faculty for the course to bring their latest in knowledge to the 50 or more visiting doctors. At the Board meeting, cochairmen were appointed to work out informal hospitality for the wives of the doctors attending the next Postgraduate Course.

Dr. James H. Nelson, Jr., Chief of Staff, in his monthly talks at the Board meetings, has been altogether helpful in making us more understanding and knowledgeable about the work and needs of the Hospital and Staff. He announced in September that work was about to begin on extensive alterations to the offices and waiting room area on Vincent I so as to provide additional office space as well as to change the hallway to be in compliance with recent fire laws.

Mrs. Joseph Stukas, our nursing supervisor, kept us informed each month on the state of the nursing service. The Board agreed to purchase a model breast for teaching purposes for both nurses and patients. It is also financing, on a six-month trial basis, a weekly social hour for long-term patients who need the support of each other and also a recreational activity. Tea, coffee, fruit juice, and cookies will be available.

Before the Board meeting in November, the annual coffee party was held to celebrate the 31st birthday of the Vincent Memorial Hospital in its present building. This yearly event is a pleasant occasion which enables the Board to meet and talk with the Hospital family--doctors, nurses, laboratory and other personnel.

At the November meeting, Dr. William F. Crowley of our staff talked about his work with steroid hormones. In March, Dr. Charles A. Sanders, Director of the MGH, gave us an interesting and informative talk on the regulatory influence of government in hospitals and hospital plans for the future. He also spoke of the Ambulatory Care Center which is now in the planning process.

Members of the Board continued their visiting on Vincent II and III. We are told that this is a much appreciated service. Certainly it is a tangible way to fulfill one of our purposes: to provide for the care and comfort of the patients over and above their medical needs. The Chairman of Visiting keeps the Vincent floors and the GYN clinic cheerful with flowers and plants.

One of the requirements for provisional members of the Vincent Club is a tour of the Hospital. In June, an expanded and successful tour was given. Following a talk on the history of the Hospital, Dr. Nelson gave them a broad picture of the administration, work, and facilities. Mrs. Stukas talked about the nursing service, and Dr. David MacLaughlin of our staff spoke of the research programs. This was followed by a conducted tour of the research laboratories and a trip through the Hospital and the GYN clinic.

The members of the Board of Managers appreciate the opportunity to be a part, however small, of this very fine Vincent Memorial Hospital. The staff contributes greatly to our understanding of what it is all about. The Board of Trustees gives us its firm support. And, far from the least, are the members of the Vincent Club who, for most of the year, work hard and with much creativity and energy to make possible their contribution to the Hospital.

Respectfully submitted,
CECIL JONES STEVENS
(MRS. EZRA F. STEVENS)
President, Board of Managers

Report of the Chief of The Vincent Memorial Hospital

The year ending September 30,1978, found the Vincent Memorial Hospital, in some ways, in a holding pattern. The residency is approved and we are now bringing in new residents at the bottom, filling the complement allowed at a slow pace rather than attempting to bring in all eight residents at the four levels at once. The internship was approved during 1978, a very important step because it allows for recruitment of fourth year medical students and gives access to the very best students.

Dr. Rod Urcuyo departed in September 1978 to return to his homeland of Costa Rica. His expert teaching and clinical skills will be sorely missed by all in the department. Dr. Arlan Fuller has accepted an invitation to join our staff and will do so during the coming year. Dr. Fuller is a Harvard Medical School graduate currently completing a two-year postresidency fellowship in gynecologic oncology at Memorial-Sloan Kettering Cancer Center in New York City.

During the year nursing staff in the "Vincent" has continued to mature and offers a very important new aspect of care to our patients, namely, primary nursing care. This adds up to a great deal of understanding and support for the patients because the patients have their own nurse or nurses, so to speak.

The Vincent Hospital beds were occupied by 21 percent more gynecology patients than in the previous year. Outpatient visits continued to increase as did surgical prodecures. The physical plant of the Vincent Hospital was surveyed in the interest of increasing the number of showers and bathrooms and for air conditioning. We were told the costs would be prohibitive and some changes would put us in violation of the health code. As the daily room rate steadily rises, the need to upgrade the facilities becomes our most serious problem.

The Vincent Research Laboratory, in the end, had a banner year both in the work accomplished and in research funds captured. Along the way it was necessary to plant a considerable amount of "seed money" to keep things going and to set new programs in motion. It paid off when grants totaling $98,083 were awarded Vincent researchers. Once again the funds to keep these important research programs in full operation came from Vincent research funds, another example of the unwavering support of the Vincent Board of Trustees. The new research grants were awarded to Drs. Janet W. McArthur, Inese Z. Beitins, Thomas M. Badger, and William F. Crowley, Jr.

Drs. George S. Richardson and David T. McLaughlin continue to study progesterone receptors in normal and abnormal endometrium and have identified the first specific component in uterine secretions. They began working to characterize its structure and that work continues. Dr. McArthur, in collaboration with Drs. Beitins and Crowley, has continued studies of the biochemistry of cervical mucus in bonnet monkeys housed in the Vincent Animal Farm. These studies are being extended to normal human volunteers.

Dr. Beitins continued the work on gonadotropins. She is studying the heterogeneity of these substances and the effects of nutrition on them. Her activities include collaboration on studies concerned with the chemistry and measurement of peptide hormones of reproduction and finally collaborative studies on Mullerian inhibiting susbstance.

Dr. Crowley was awarded a Clinical Investigatorship, the first awarded by the NIH. He has moved along with investigations on hypothalamic endocrine substances and their usefulness in controlling fertility as well as treatment of infertility.

Dr. Badger has established several new assays in the Vincent Laboratories which enable him to establish independent studies in neuropharmacology, especially as related to reproductive endocrinology. This area of research is new not only to the Vincent Laboratory but to medicine in general.

Dr. Najmosama Nikrui has begun to put chemotherapy protocols on a more systematic basis so as to permit a more critical evaluation of results. Dr. Barnes has become expert in the microsurgery of infertility, a much needed talent in the Vincent Hospital.

These remarks, stated briefly, represent the past years medical record minus the many hours spent teaching. Our nursing staff is now gaining the recognition it so clearly deserves and is now a strong factor in nursing education throughout the larger MGH complex. For whatever accomplishments we claim, full credit must go to the Trustees, the Board of Managers, and the officers, board members, and members at large of the Vincent Club. Their enthusiastic and unwavering support has created an atmosphere for accomplishment which is almost unique in this country.

JAMES H. NELSON, JR., M.D.
Chief of the Vincent Memorial Hospital

Report of the Department of Nursing

Fiscal 1977-78 can best be described as an exciting, challenging, and productive year for the Department but one which has been marked by a recurring series of internally and externally oriented frustrations.

On the positive side, one can point to significant accomplishments on the part of the respective nursing services in the identification, implementation, and evaluation of the components of professional nursing practice. After a decade of effort to analyze and synthesize the essentials of the nursing process - i.e., assessment of patient/client needs, nursing histories, written care plans, patient/client focused care, written documentation of the care given, and ongoing and retrospective evaluation - we were rewarded by a survey decision of "no recommendations for the Department" on the occasion of the last visit of the Joint Commission on the Accreditation of Hospitals team. This achievement is a notable one and the credit rests soundly in the court of those staff members who believe: (l) that nursing and nurses have a unique role to play in this institutional setting, and (2) that through individual and collective effort both the **caring** and **curing** mission of nursing can be accomplished. Special mention in this report must be made of the indefatigable effort of the 10 Nursing Practice Committees to articulate a philosophy of nursing care in keeping with institutional goals, to define objectives and standards of care by diagnosis/condition, to devise systems of delivery in which the client/patient become the "raison d'etre" of the therapeutic intervention, and to implement ongoing evaluative measurements of the quality and quantity of the care rendered.

This activity has called for (and the future promises no let up) an intense effort on the part of the staff to meet the externally mandated criteria relative to cost and quality controls. On this score, in conjunction with an Ernst & Ernst consultative team, we have continued our effort to design and perfect a Patient Acuity Classification System geared to our particular setting. We anticipate that it will be functional during the next fiscal year.

Our written materials are in constant demand in a variety of nursing circles and, at this writing, we are negotiating with publishing companies for the release of our **Pediatric Nursing Standards and Procedure Manual**; our **Operating Room Nursing Manual**; and a revised edition of our **MGH Nursing Procedure Manual**, which was first published in 1975.

As noted in the Department's last annual report, we enthusiastically supported the Administration's adoption of a merit-based wage and salary program. During the year, we were successful in developing a series of behaviorally-oriented evaluative dimensions of performance for every position category in the Department, with representative input from staff members. We anticipate that the upcoming year will reflect further fruition of this concept of reward for contributions made to the service and the institution.

Certain milestones deserve special mention in this report, such as:

— The transference of the Emergency Ward and Holding Area Operations of the Chelsea Memorial Hospital to the MGH organization on July 1, 1978. The Department was deeply involved in expediting this complicated process.

— The opening of the newly-constructed Recovery Room on White 3 in May 1978 and the subsequent opening of the new Operating Rooms in the Jackson Building in July 1978.

— The assumption of the administrative responsibility for the Hemodialysis Nursing Service on White 12 in December 1977.

— Continuing Department input into the development of plans for the projected Ambulatory Care Center, including a clarification of nursing's role in the group practice model.

— The maintenance of our stellar position on the local, regional, and national scene relative to the quality and quantity of our educational offerings. The number of participants in fiscal 1977-78 exceeded 1,800, with more than 400 coming from outside the institution.

Mention must be made in this report of some unsettling trends in nursing circles - i.e. a diminishing number of nurses who are attracted to full-time positions in an acute care setting; a singular reverse in the number interested in intensive care nursing; a marked predilection on the part of many to seek employment on a per diem basis, with the innate advantage of flexibility in scheduling through arrangements with outside employing agencies; and the exit of large numbers from the work scene to complete the requirements for professional degrees in nursing and other fields. We anticipate that these developments will present serious challenges to our modus operandi as a Department in the years ahead.

In this report it is appropriate to call attention to the retirement of Ms. Adele Corkum, Assistant Director of the Baker Memorial Nursing Service, on September 30, 1978. Her departure, after 44 years of dedicated service to the MGH in many capacities, will leave a significant void. On this occasion, we salute her and wish her health and happiness in the days ahead.

MARY E. MACDONALD
Director, Department of Nursing

Report of the Social Service Department

Increasingly, the work of the Social Service Department is shaped by the impact of the external environment on the Hospital and on our patients. The percentage of elderly persons in the population grows each year while the value of their limited fixed incomes decreases with inflation. All too often when health crises occur, frail social and living arrangements of individuals collapse. Simultaneously, governmental efforts to contain costs continue to cause cutbacks in available institutional resources and to limit the availability of community based support systems which might otherwise offer alternative methods of care for these elderly persons.

The Social Service Department has provided services to 11 percent more patients this past year than in the previous year while the number of available resources outside of the Hospital continues to decline. Complicated discharge plans were required for more than 7,000 patients this year, the number of transfers to other institutions actually decreased by 11 percent continuing the trend of the previous year. Between 1965 and 1975, the number of patients transferred to long-term care institutions increased annually; for the past two years, the total decline has been 16 percent. Long-term care beds continue to decrease in number with occupancy rates constantly close to 100 percent. Community based alternatives are inadequate to meet the increasing needs so that waiting lists for essential services in many areas get longer. The difficulty in locating available aftercare resources continues to delay discharge for some patients, so that these patients continue to incur the high costs of acute hospitalization beyond medical necessity.

For these reasons the Department took the initative during this year to develop a community based program of long-term care. With the assistance of the Permanent Charities Corporation and the Frederick E. Weber Charities, a pilot program of adult foster care was developed. Families interested in providing care to frail elderly persons unable to live alone were recruited, evaluated, and trained to deal with basic nursing and social needs of patients. Patients have been matched and are living with these families. Our staff monitors these placements closely with frequent visits to the homes. We are most enthusiastic regarding the patients' rapid rates of improvement, the relative degree of independence they achieve, and the improvement in quality of life they perceive. Preliminary findings also indicate the program to be cost effective with a saving of approximately $4,000 per patient per year. (This calculation is based on the cost of care in a foster home plus administrative expenses compared with the average cost of a Level III nursing home.)

We also supported the passage of legislation which requires the Department of Public Welfare to establish additional pilot programs testing the concept of substitute family care. Five pilots have been funded by the Department of Public Welfare and Department of Elder Affairs. One of these contracts has been awarded to the MGH. Medicaid also is planning a method of reimbursement for such programs so they can continue after the end of the pilots. Thus it would appear we have been able to institute one viable alternative for some of our most needy patients.

The increased number of patients served was reflected in sharply increased statistics on departmental productivity. A total of 64,145 contacts with patients occurred in the Ambulatory Care Division, including the Emergency Ward, Bunker Hill, and Chelsea Health Centers. Approximately 10,000 more social service visits than last year occurred in the Ambulatory Care Division at the MGH. Data on contacts were also collected for the first time on inpatient services; 63,819 contacts occurred, exclusive of Transfer Office activities. Sharply increased demand in the Baker Memorial led to shifting staff and a subsequent need for increased space. The Baker office was remodeled this year and a small increase in square footage (our appreciation to the Department of Nursing) made possible more efficient work space for larger groups. In line with other increased demand, our expenditure of ancillary funds (nongeneral funds) also increased by almost $30,000 to a total of $158,485. Of this amount third party payors refunded the department $69,435, the largest percentage of which was spent on transporting patients. Other supported activities included purchase of medicine and medical equipment (sharply up this year because most third party payors are still unwilling to pay the cost of hyperalimentation supplies after a patient returns home, homemaker and home health services, and camp experiences for children related to our programs for prevention of child abuse). This latter activity is partially supported by the City of Chelsea with three to one matching by the Department of Public Welfare Title XX funds.

Eighteen masters degree candidates in social work from Boston College, Simmons, and Smith and two candidates from Middlesex Community College received their practicum experience at the MGH during the past year. The first masters degree candidates spent three days a week at the Hospital and the second year students were here full time.

The Department is especially appreciative to the following individuals and trust funds whose generosity has enabled us to assist a large number of patients:

American Cancer Society
Edward Bird Trust
Mrs. Sadie Birnbaum
Mrs. Dorothy Boardman
Ethel Walcott Chase Fund
Dr. John C. and Melba Coolidge
Lotta Crabtree Trust
Cushman Cancer Fund
Edith S. and Francis B.
Fisher Memorial Fund
Ladies Visiting Committee, MGH
Lend-a-Hand Society
Friends in Memory of John Masterson
Mrs. Alice Boardman Moorish
Permanent Charity Corporation
Shaw Fund for Mariner's Children
Frederick E. Weber
Charities Corporation
Whitehouse-Foster Memorial Fund

ELEANOR CLARK
Director, Social Services Department

Report of the Dietary Department

As 1978 draws to a close, it appears that we have experienced a very fine year, characterized by a degree of success which can be attributed to the careful implementation of rigorous planning. In each professional emphasis, in these times of accelerating change, we have experienced a rewarding consistency under a wide variey of conditions.

Administration

We are proud of our success in offsetting rising food costs. While our budget showed an increase of $135,744, that seven percent increase was three percent below the U.S.D.A. consumer price index.

Several major changes were realized in the physical plant: flourescent lighting in the Baker Kitchen; the reallocation of office-storage space in the Baker-Phillips House; and the installation of nourishment stations to replace outmoded pantries in the White Building.

Ambulatory Services

The Bunker Hill Health Center Nutrition Unit records approximately 700 participants in the federally funded supplementary foods program for Women, Infants, and Children (WIC). An expansion of this program provides for primary nutrition care services in addition to food supplementation.

In July, when the MGH assumed new responsibilities at Chelsea Memorial Hospital, health centers nutrition unit staff planned for and now implements food service and nutritional counseling services for patients admitted to the 10 bed inpatient unit.

A total of 10,524 nutrition visits were recorded by Bunker Hill and Chelsea Health Centers in the fiscal year. The Nutrition Clinic census indicates a slight decrease in the numbers of new patients but a slight increase in the visits per patient. We interpret this to mean progress toward the goal of continuing follow up to achieve behavioral change in patients whose dietary patterns are not consistent with disease control or prevention.

Inpatient Clinical Services

We continue to experience strong demands in the clinical services. In February, changes were made in the Diet Kitchen production patterns. By centralizing the making of enteral feedings in the White Kitchen and by supplying supplementary beverages from the Baker Kitchen, we have insured greater standardization and efficiency.

The Medical-Surgical Service records 75 percent and 52 percent of the patients on modified diets--14 percent on tube feedings and four percent on elemental diet.

Plans indicate increased diversity of protocols with nutritional implication as the mission of Mallinckrodt Ward Four undergoes transition to a general clinical research center. The Vincent-Burnham staff report an increased interdepartmental role in both Pediatrics and Gynecology. This has been augmented by administrative approval for an additional staff member. Not only has it strengthened that unit, but it has reinforced our role in the MGH educational division as well.

Education

Annie Galbraith, R.D., serves as Acting Dean of Faculty of the Education Division. The Acting Dietetics Program Advisory Committee is chaired by Susan Laramee, R.D. A prime consideration is the maintenance of the high quality of the accredited dietetic internship for the outstanding group of 28 individuals who are currently enrolled while planning for the anticipated M.S. in Dietetics program.

Our educational component has been further stregthened by a new position funded to develop and evaluate training programs for supportive personnel. Based on a needs assessment, Johnnie Morgan, R.D., has initiated and implemented appropriate educational goals and objectives. Critiqued by staff and personnel, there is unquestionably a positive response to the present success and future value of this endeavor.

There is no way to give adequate recognition to the competencies of the staff and personnel. In estimating the future, we are confident as we continue to rely on their firm sense of dedicated purpose.

LOUISE HATCH, R.D.
Director, Dietary Department and Dietetic Internship

Report of the Advisory Council Of the School of Nursing

The Advisory Council of the MGH School of Nursing for the academic year 1977-1978 was composed of the following members:

From the Field of Education

Mr. Maurice J. Downey, Chairman
Miss Helen Belcher
Mrs. David H. Morse
Miss Eleanor Murphy

From the field of Health

Dr. Ann S. Baker
Miss Alice Dempsey
Mrs. Casper Ferguson
Miss Mary E. MacDonald
Mr. Ronald S. Nichols
Miss Joanne O'Brien
Miss Natalie Petzold, Director School of Nursing
Dr. Charles A. Sanders, General Director MGH

From the Community at Large

Mrs. Harris Fahnestock
Mrs. Oliver Oldham
Miss Marguerite Ryan, Secretary

From the Alumnae Association

Mrs. Belinda Asano
Miss Helena T. McDonough
Mrs. Jean Teague

The first meeting of the 1977-78 season was held on Tuesday, September 25, 1977, in the Trustee's Room of the Massachusetts General Hospital. At this meeting, as well as at every one that succeeded it, the overriding topic of discussion was the imminent transformation of the diploma school of nursing into one that would be Commonwealth-authorized to grant graduate degrees in the vital field of nursing education.

At the time of the September meeting, all of the legislative and legal procedures had not as yet been accomplished even though all the routine hurdles attendant to such a drastic change had been negotiated.

In January, the Governor signed legislation which cleared the way for the MGH to proceed with its new educational programs following a waiting period for the legislation to go into effect. In April, the state agencies, required by law to be notified, were told of the Hospital's intent to establish the new Educational Division. In May, the Hospital was free to take the first step towards implementation. As a result, Miss Dorothy Mahoney was appointed as the Acting Faculty Member for Nusing along with Dr. Nancy Watts, Acting Provost; Annie Galbriath, Acting Dean of Faculty; Cynthia Snow, Administrative Assistant; and Joseph Moore, Acting Finance Officer. Later in the year it was formally announced that the Trustees had definitely voted to gradually phase out the School of Nursing diploma program. The class admitted in September 1978 will be the last entering and graduating class. The Trustees have also decided to plan to admit the first students to the Master of Science program in Nursing, as well as the programs in Dietetics and Physical Therapy in Sepetmebr 1980.

As Miss Natilie Petzold, the present Director of the School of Nursing, explains so well, "The decision of the Trustees represents the end of an era, but not the end of education for nursing at MGH. Just as the school has had different arrangements and patterns in education over the years, the time is right to undertake another major transition."

MAURICE J. DOWNEY
Chairman

Report of the Massachusetts General Hospital School of Nursing

Anticipating and planning for change prevailed during 1978, permeating virtually every facet of the School of Nursing Diploma Program and its resources. Although supporting the concept and need for a transition of the diploma program to the proposed degree granting model, faculty, support staff, and students experienced increased uncertainty and stress heightened by the continuing indeterminate time table, the many questions still to be answered, and rumors. The slow filling of the freshman class led to more immediate issues related to staffing needs. Simultaneously, uncertainties emanating from space planning and the prospects of relocation, while separate from the school program transition, nevertheless added to feelings of insecurity and impending sense of loss and separation.

Various strategies were utilized to anticipate and address issues and concerns; to identify and prevent avoidable problems; to facilitate open, timely, and accurate communications; to maintain perspective; and to direct energies toward productive, realistic, achievable goals.

Space needs were reassessed to ensure continued provision for facilities essential to the functions and services of the program; to anticipate relocation if Walcott House is razed; to articulate with planning for proposed programs; and to identify school occupied space which might be released for other purposes. During the "Storm of '78," beds were provided in Bartlett Hall for 154 persons, mainly residence desk staff working double shifts and hospital personnel from many departments. The storm offered a tangible rallying point for staff and students who contributed to the total Hospital effort with loyalty and commitment.

Despite the conflict experienced by many staff, both wishing to see through their commitment to the program yet realistically needing to engage in longer term career and graduate education planning, a relatively high degree of stability prevailed. Because of lower student enrollment, three fewer positions were filled for September 1978 through normal turnover but the same overall faculty student ratio was maintained. Though two other vacancies meant additional workload for some, this was preferred by those involved compared to prospects of orienting new staff for short-term duration.

The September 1978 entering freshman class of 102 students was 28 less than the maximum for whom spaces were available, but the size happily exceeded our expectations. Recruitment was hampered by several factors: the decision to admit another class being delayed until December 1977; the assumption made by many in the community that the diploma program had already been discontinued due to the announcement of the Hospital having received degree-granting authority; a virtual no-growth rate in admissions to all types of professional nursing education programs in the United States; and three severe storms which necessitated canceling three Open Houses planned for prospective applicants. Invitations for the school to participate in 18 college career days in September, when concentrated recruitment must begin, had to be declined for lack of a decision to admit another class.

The mix of the student body continued to be similar to that of the last several years. The entering class ranged in age from 17 to 34 years, included 95 women and 6 men, and represented 15 states and Puerto Rico. Less than one third entered directly from secondary school. The remainder had previously completed from one to four years of college; one had earned an M.A. degree. Four foreign nurse graduates enrolled in the Maternal-Child or Mental Health Nursing courses to make up prerequisites for the licensing examinations.

Activities concerned with career and educational counseling increased as more students seek assistance in formulating and planning for future professional goals and recognize the variety and instability of credentialling mechanisms both in nursing education and employment.

Follow up studies of our recent graduates continue to indicate their good level of competence according to employer ratings and the ready absorption of the graduates into the supply of employed registered nurses, reflecting also the low unemployment rate in the United States (two percent) of newly licensed nurses wishing to work. Vigorous, competitve recruitment by potential employers continued to escalate, offering abundant opportunities to those who can be flexible in geographic and time commitments. Responses from recent graduates generally indicated their belief that the program had prepared them well for their positions, but increasing numbers express the wish that adacemic credits might have been earned for greater educational and career mobility.

Tuition, fees, and room charges, not including meals, increased in September 1978 to approximately $2,600 annually, an average increase of $190. Of the total student enrollment, 43 percent received financial assistance, representing six more students than the previous year. Awards of public or private funds made through the Student Financial Aid Office, or under various federal and state direct entitlement programs, totaled $302,274, approximately $22,000 greater than in 1977. In addition, $24,026 in veterans educational benefits was received by eligible students. The thoughtfulness and generosity of numerous alumnae and others who contribute to student financial assistance funds of the school is appreciated. Three new gifts this year established the Mary Hammond Taylor Scholarship, the K. Barbara Dormin Memorial Award, and the special fund for the MGH Nurses' Training, Education, and Leadership.

In addition to addressing issues and ensuring compliance with myriad external regulations, the faculty continued assiduously to evaluate, develop, and maintain the quality of its programs and services. Examples, too numerous and detailed to include here, abound in the annual reports of the functional areas within the school, documenting accomplishments, goals attained, goals still to be achieved, and recommendations for the future.

Members of the faculty continued to participate as well in planning for the proposed degree programs of the Education Division. Dorothy Mahoney assumed additional responsibilities representing the nursing program as a member of the acting faculty of the Education Division.

The support and understanding of members of the Hospital administration and the help of many departments who contribute so much to our operation continues to be greatly appreciated. With respect and admiration for their fortitude, I extend special thanks to the dedicated faculty, support staff, and students of the school.

NATALIE PETZOLD, R.N.
Director of the School of Nursing

Report of the Treadwell Library

Development of the Library as an active information center progressed unevenly during the last year. Service to the user at the Information Desk was improved significantly. However, the volume of demand for services did not increase at the same rate as for the previous year. Two new research studies designed to provide quantitative measures of the use of the Library and the collection were started. Three projects to reorganize the collections were not completed as scheduled. And by the end of the year a new location for the Library had yet to be determined.

Services

Emphasis placed on refining the systems at the Information Desk resulted in improved service to the user, i.e., more efficient access to materials not on the shelf, more consistent and uniform level of service, and effective assistance in finding information to answer various types of questions. The efficiency of stack maintenance was so improved that it was possible to shift 20 percent of shelving staff time to staffing for the Information Desk, which relies on staff from other units in the Library. Enhancing the desk service are new directional and instructional signs designed to assist the user in locating resources quickly and easily, and information sheets or handouts on the Library's services.

Demand for services, which had increased by more than 30 percent the previous year, did not increase at the same rate. Inter-library loan requests were reduced by 17 percent. A new fee for each filled request which was instituted in January seems to have effectively controlled these requests. Increased fees for photocopying and computerized literature searches may have served to control the use of these services. Fees assign value to information services and thereby ideally restrict their use for legitimate needs so long as all users have funds assigned to them for such expenditures.

Demand for computerized literature searches did not increase at the rate projected in spite of publicity throughout the institution. Instructional sessions on MEDLINE were conducted for Carbohydrate Research, Dermatology, Orthopedics, and Pediatrics. These sessions were effective in stimulating use of the service. A more ambitious program on instruction on data bases is planned for 1979.

Collection Reogranization

The completion of two projects, reclassification of the book collection and missing issue replacement, was delayed by staffing problems. This delay, however, allowed time to review and revise policies and procedures for organizing print materials. Also, we were not able to add new journals to the collection. Additions and deletions are to be based on analysis of the data collected for the Journal Use Study.

Research Studies

Funding for the Journal Use Study, begun in 1977, was provided by a Biomedical Research Support Grant to support the extensive data collection and computer analysis of data. The computer reports will be ready in January 1979. These should provide valuable information on the titles to be added or deleted, the space required, and the costs of a journal collection responsive to actual use.

Data collected in this study were used for a brief ''offshoot'' study of the soundness of decisions made to delete journal titles in 1975 based on the opinion of medical staff. Results of this study, which were published in the **Bulletin of the Medical Library Association** 66(3): 346-49, July 1978, provides evidence to illustrate the advantages of quantitative measures of use over traditional subjective methods for evaluating journal titles.

A new study of Library users was designed to develop a profile of users by job title, department, funding, and reason for the visit to the Library. A study to determine use of the books in the Reference and the Reserve Collection was begun. And the study of Department and Unit Libraries was completed and a record of their journal holdings developed to augment the Library's resources.

Optimum development and management of the Library depend on a program of well-designed research studies on the most cost-beneficial methods of collecting, organizing, and disseminating information. To assure the orderly development of such a research program as an important component in the administration of the Library, a 0.5 FTE position of

Research Project Librarian was added to the staff. This position is responsible for conducting periodic objective measurements of systems and services and for facilitating the applications of study results to the routine library operations.

Conclusion

This next year is viewed as an interim year during which the reorganization projects should be completed, the move to new quarters probably accomplished, and plans prepared for the next stage of development. Emphasis will be placed on using the latest technology to:

1) provide more efficient access to resources;
2) develop instructional services for more efficient user access to information; and
3) disseminate information wherever and however it is needed.

The Library as an active information center should be better able to serve the increasingly complex information requirements of the MGH health care community.

JACQUELINE BASTILLE
Director, Treadwell Library

Report of the Volunteer Services Committee

The Volunteer Services Committee continues to bring together and organize the volunteer efforts of the auxiliaries within the Hospital; the Ladies' Visiting Committee, the MGH Service League, the Ladies' Visiting Committee of the Massachusetts Eye and Ear Infirmary, and the Vincent Memorial Hospital Board of Managers. The Volunteer Department, obviously, works closely with the Committee and the leaders of the various groups.

In addition to the inhospital members, the Volunter Services Committee has representatives from McLean Hospital, the North End Community Health Center, the Bunker Hill Health Center, the Charlestown Community Center, Inc., and the Chelsea Community Health Center. The Committee met three times during the year. A meeting was held in March at the MGH. Ms. Thelma Tisdale, R.N., reported on the hypertension program being carried out in Chelsea. The May meeting was held at the North End Health Center where Elaine Wilson, Director of the Center, spoke of the renovations that have been carried out at the Center and the staff's hopes for the future. The October meeting at the MGH was devoted to reports from the various members and how we can best interact for our mutual benefit. The opportunity to discuss individual and general problems is welcomed by the members, and we continue to explore the constant problem of attracting the community to increased volunteer service.

MRS. NELSON W. ALDRICH
Chairman

Report of the Volunteer Department

This year was one of transition and evaluation for the Volunteer Department with every aspect of its function and operation taken under careful consideration.

We measured our standards against those projected by the American Society of Directors of Volunteer Services as "Standards for a Department of Volunteer Services in a Health Care Institution." We found that our standards compare very favorably with those projected, and we have a sound foundation to build on.

After restructuring our record keeping process, both simplifying and making it more comprehensive, we were able to compile statistics which helped to identify some areas of weakness, define goals, and set a time frame for their accomplishment. With the volume of work documented, I submitted a proposal for the position of Coordinator of Volunteer Services. This was approved by the Administration in April. In May, Mrs. Maryellen Shachoy, formerly Director of Volunteers for Channel 2, joined the Department to fill that position.

The evaluation process established the credibility of the Department, defined immediate and long-range goals, and justified adequate staffing to accomplish them.

I was pleased that during this process we were able to maintain the pattern of annual growth begun in 1969, when our statistics showed totals of 610 volunteers and 51,186 hours. This year 887 volunteers contributed 74,787 hours, an increase of 62 volunteers and 3,049 hours over the previous year. I was disappointed that we had not quite reached our projected goal of a 10 percent increase. The evaluation process also confirmed the need to increase the volunteer staff to more adequately meet the needs of existing services and projected new services, and revealed that we had a high attrition rate among evening volunteers. We have, therefore, activated a more aggressive recruitment drive, including advertising our need for volunteers over 13 radio stations and the distribution of an attractrive recruitment flyer to schools, colleges, and churches in the area.

We are working to develop more adequate training for volunteers by reviewing the volunteer job descriptions with the professional staff in the service areas and identifying skills needed. We also initiated a regularly scheduled educational opportunity for volunteers by a series of luncheon lectures held during the summer. We hope that the training and education opportunities offered will make volunteering at the MGH more rewarding.

We have designed our own volunteer recognition pin and now award the pin for 100 hours of service. We give a bar at 500 hours and change the bar at 1,000 hours and thereafter at increments of 1,000 hours. This change, plus the cost of living increase in the value of complimentary snack tickets, is appreciated by our regular volunteers.

The Department's association with the MGH Flower Shop has substantiated our belief that volunteers can organize and manage major projects. With only one full-time and one part-time employee, the committee of volunteers weathered growing pains and expensive structural changes in the facility to establish sound procedures and a very acceptable margin of profit. Mrs. Francis U. Paige and all the Flower Shop volunteers are to be congratulated. They have provided the equivalent of four and one-half full-time persons to staff the shop, not only establishing a consistent source of income for the Ladies' Visiting Committee, but also a source of pleasure for, and service to, the entire Hospital family and the visitors that come through our doors.

In other program areas, the Department moved ahead to carry out feasibility studies and to establish four new services:

- Patient Support Services on Gray/White 2 Radiology Unit
- On-Call Transport Service for the Ambulatory Care Division
- Patient Support Services for the MGH Health Center in Chelsea
- Patient Support Services for the Kidney Transplant on Phillips House 8.

The Utilization Review Chart gives a picture of all the services provided.

As we look forward to another year, may we remember the words of the late Margaret Meade, "...almost everything that really matters to us, anything that embodies our deepest commitment to the way human life should be lived and cared for depends on some form--more often many forms--of volunteerism."

MAEVE BLACKMAN
Director, Volunteer Department

UTILIZATION OF VOLUNTEER SERVICES OCTOBER 1, 1977—SEPTEMBER 30, 1978

AREA	DAY		EVENING		TOTALS	
	No. Vols.	Hours	No. Vols.	Hours	No. Vols.	Hours
Flower Shop	62	8,495	20	800	82	9,295
Emergency Ward	164	7,519	24	1,059	188	8,578
Clerical	35	6,335	1	20	36	6,355
Ambulatory Care Div.	63	6,085	3	47	66	6,132
Cox Cancer Center	45	4,414	0	0	45	4,414
Laboratories	20	4,302	0	0	20	4,302
Patient Care Units	27	1,334	50	1,968	77	3,302
Interpreters	28	2,856	4	77	32	2,933
Recreation Therapy (Baker-White 5-White 9)	45	1,834	20	879	65	2,713
Telesurgery	10	2,446	0	0	10	2,446
Blood Bank	36	2,106	8	254	44	2,360
Central Supply	26	2,351	0	0	26	2,351
WMGH	14	2,182	0	0	14	2,182
Information Desks (White-Gray-Cox)	24	2,177	0	0	24	2,177
Warren Library	25	1,405	6	307	31	1,712
Pharmacy	7	1,415	0	0	7	1,415
Pediatric Play Program (Burnham)	9	322	30	1,063	39	1,385
Chaplaincy	25	1,172	0	0	25	1,172
Patient Care Representative	16	1,135	0	0	16	1,135
Tours	13	983	0	0	13	983
Coffee Shop	12	964	0	0	12	964
Art Wagon	15	744	0	0	15	744
Radiology	17	706	0	0	17	706
Photography Laboratory	4	682	0	0	4	682
Craft Program	4	669	0	0	4	669
General Hospitality-Admitting	7	656	0	0	7	656
Traveling Store-Patient Units	13	611	0	0	13	611
Surgical Day Care	7	587	0	0	7	587
Floats	8	431	0	0	8	431
Chapel Concerts	8	416	0	0	8	416
General Admitting-Escort	2	335	0	0	2	335
Baker X Ray	11	329	0	0	11	329
Red Cross Arts & Skills	2	169	0	0	2	169
Child Psychiatry	3	146	0	0	3	146
TOTALS	807	68,313	166	6,474	973	74,787

86 volunteers working in two or more areas. Therefore, total number of separate individuals working is 887.

Report of the General Store

Balance on Hand - December 31, 1977			$ 37,448.51
Cash Receipts			259,563.36
Total Receipts			$ 297,011.87
Expenses:			
Salaries	$ 59,590.25		
Fringe Benefits	9,534.45		
Hospital Pension (Burnell)	475.68		
Social Security	3,594.81	$ 73,195.19	
Stock Purchased:			
Outside Vendors	$ 163,691.27		
Upper Store	13.51	$ 163,704.78	
Utilities:		$ 109.97	
Commonwealth of Mass. Sales Taxes	$ 4,061.85		
Maintenance Department	94.31		
Christmas	130.00		
MGH Paging Service	240.00		
Carpet and Installation	1,150.12		
Planning Office	10.00		
Photo Lab	108.00		
Transportation	10.00		
Freight Charges	169.55	$ 5,973.83	
Total Operating Expenses			$ 242,983.77
Paid to Ladies Visiting Committee			25,000.00
In House (Not an Expense)			52.28
Balance on Hand December 31, 1978			$ 28,975.82

SUMMARY

Receipts	$ 259,563.36	
Expense	242,983.77	
Cash Gain	$ 16,579.59	
Decrease in Inventory	60.17	
Operating Gain for 1978	$ 16,519.42	
Value of Inventory December 31, 1978		$ 12,905.91

The fiscal year of the General Store remains on the calendar year.

VIRGINIA H. GRAY
Treasurer

Report of the Ladies' Visiting Committee

Today marks the beginning of our 109th year of service to the MGH. We can be proud of our contributions, both the volunteer service provided and our financial support. Our projects of long standing are more needed today than ever before, and our newest venture, the Flower Shop, is "blooming" and producing excellent revenue.

We can be gratified by the success of the Charlestown Community Center and the North End Community Health Center, which we supported in their infant stages.

The success of all our services is due entirely to the enthusiasm and devotion of our volunteers. We are deeply grateful to our many chairpersons and their loyal committees.

Financially, we were able to fulfill all requests, large and small, ranging from $4,500 for Cox patients' parking to $25 for postage on mailing our Spanish booklets to other hospitals. By our contributions to the MGH, we have reduced the original Coffee Shop Loan of $200,000 to $41,000. Most of these monies are made possible by the success of the General Store and now the Flower Shop.

We were saddened by the retirement of Mrs. Helen Warton (Breed) as General Store Manager after so many years of devoted service. She was honored at our June meeting and presented with a gold pin. We look forward to workiong with Mrs. Sanborn and we enthusiastic about new plans for the store.

We are faced with only one problem: an ever increasing need for more volunteer support to maintain existing programs and initiate new ones vital to the Hospital. There is a need for each of us to contribute in her own way. There are many available projects offering a challenge, a learning process, and always a personal satisfaction.

The L.V.C. has been supported in every way by the Volunteer Department, and it is a particular joy to work with Mrs. Blackman as Director.

We welcomed as new members:

Mrs. Thomas L. Johnson, Jr.
Mrs. George S. Richardson
Mrs. Carter R. Rowe
Mrs. Robert A. Witbeck

We accepted with regret the resignations of:

Mrs. Henry Russell
Mrs. H. Baldwin Terry
Mrs. Douglas Garfield
Mrs. George Blackman

We recorded with deep regret the deaths of:

Mrs. Sumner Pingree
Mrs. Augustus Thorndike

We are particularly grateful to our speakers:

Dr. Charles Sanders, General Director, MGH
Dr. John Constable, Visiting Surgeon, MGH
Mrs. Betty Sheehy, Nursing Administrative Officer, Phillips House
Mrs. George Blackman, Director of Volunteers
Special Guest, Mrs. Helen Warton (Breed)

LOUISE C. RIEMER
Chairman

Report of the MGH Service League

The Service League is nearing the end of its 27th year with a membership of 299.

The Reception Center, under the chairmanship of Mrs. Frederick T. Hurley, registered 101 international visitors, largest number to date, from 35 countries including, for the first time, Jordan, Nigeria and Thailand. Mrs. Lawrence E. Martin, Housing Chairman, recorded 114 housing requests. Mrs. Edmond J. Raker, House Staff Chairman, sent housing information to 156 incoming residents and fellows. Mrs. C. Miller Fisher and Mrs. Henry Warner, Co-chairman of the Furniture Exchange, made 75 trips to the storage facility at McLean Hospital, reporting that 35 visitors received furniture. Eleven donations of furniture were received. Miss Alice Banard, Ticket Chairman, received and distributed 108 tickets among our visitors and House Staff, including 37 to the Boston Symphony, 66 to the Peabody Mason Music Foundation, and five to the Boston Pops.

Under the direction of Mrs. Albert C. England, 15 concerts were given in the Chapel. Four concerts have been video taped for closed circuit viewing in every patient's hospital room. Our goal is to tape three more for each day of the week.

The clinics (Ambulatory Care Division), under the Chairmanship of Mrs. Joseph N. Lyons, and from late June, Mrs. Harry R. Healy, Jr., report that 18 Service League members gave 2,591 hours in seven areas representing an increase of two volunteers and 340 service hours.

The Pops concert, under the Chairmanship of Mrs. Herman D. Suit, was a great success, resulting in the selling of 896 tickets with a current net profit of $1,415.

Mrs. Glenn Roberson presided at the Annual Meeting. The speaker was Miss Deborah Hill of the Pediatric Social Service. We are also grateful to Mrs. Maeve Blackman, Director, Volunteer Department, and Miss Priscilla Doss, Director, Patient Care Representatives, for addressing our Board Members.

Mrs. Grant V. Rodkey and Mrs. Stanley L. Grabias, Hospitality Co-chairmen, assisted by Mrs. Robert Bates, House Staff Representative, report a most successful series of 11 events. Six pool parties in July and five beach parties in August, involving 50 to 80 people each week. Activities continue into the winter and spring. Mrs. Robert Bates and her eight area chairmen provide ongoing events for the new House Staff wives.

The MGH Service League Memorial Fund was established in 1977 with donations given in the memory of Ruth Robbins. Additional donations were made in the memory of Dorothy Kranes, a former President of the Service League and pioneer in the Coffee Shop, and Jessie Wyman, a long-time loyal supporter of the Service League. From the proceeds of the fund a toy cart with toys is in the Cox Center for the use of the children coming there for therapy. In addition, a continuous display of decorative plants and flowers is provided to the Coffee Shop.

Mrs. Hanes Swingle, Service Records Chairman, recounts that in 1978 there were 60 members volunteering in regular jobs contributing 7,461 hours to the Hospital. Much appreciation goes to all the officers, chairmen, and volunteers for their endless hours of personal service.

The Mid-Winter luncheon, chaired by Mrs. George I. Nardi, will be held in early March with Dr. G. Timothy Johnson of House Call as guest speaker.

JUDITH BATTIT
President of the Service League

Report of the Department of Pastoral Services

The Department of Pastoral Services, created in October 1974, has undergone a year of significant change. On August 8, 1978, Chaplain Allan W. Reed, who served the MGH for 17 years as Chaplain and Director of the School of Pastoral Care and later as Director of the Department of Pastoral Services, resigned to accept a call from the Bishop of the Episcopal Diocese of Texas to serve as Director of Clinical Pastoral Education for St. Luke's Hospital/Texas Heart Insitute/Texas Children's Hospital. With deep feelings of loss, the Reed family left the MGH and New England to begin a new ministry in Houston. An Advisory Committee constituted shortly before his resignation became a Search Committee to find a new Director of the Department of Pastoral Services.

Named as Acting Chaplains were Scott H. Glidden and Nancy J. Reed, former Chaplain Residents in the School of Pastoral Care. Since August 8, Chaplains Glidden and Reed have provided interfaith pastoral care to patients, their loved ones, and to members of the MGH staff. They have also provided consultation and education to various services within the Hospital and to the outside community as well. At the Episcopal Divinity School, each chaplain served as an Instructor and Supervisor for students in the Pastoral Counseling course. In addition they have represented the MGH in the Boston Cluster for Clinical Pastoral Education, which includes New England Deaconess Hospital, Morgan Memorial-Goodwill Industries, and the Dorchester Mental Health Center. The MGH School of Pastoral Care (formerly supervised by Chaplain A. W. Reed) has suspended the training of Chaplain Residents. The continuation of Chaplain Resident training which began at the MGH in 1932 is currently being addressed by the Search Committee.

The Department of Pastoral Services continues to provide ministry to Roman Catholic, Jewish, and Greek Orthodox patients. We are deeply grateful to the Archdiocese of Boston, the Associated Synagogues, and the Greek Orthodox Church for the excellent chaplains who faithfully serve their people in the MGH and who enrich the lives of all whom their dedicated ministries touch. A strong spirit of ecumenism prevails in this Department as witnessed by the first interfaith Thanksgiving Service in the MGH Chapel. More such shared services are under consideration.

From January to August, the School of Pastoral Care continued its Chaplain Resident program with five full-time students who provided interfaith pastoral care throughout the Hospital. An extended quarter of Clinical Pastoral Education was elected by three students, and an additional eight students trained over a period of three to six months. Of this group: one student is in further resident training (in pediatrics) in another state; two are full-time hospital chaplains; two are Acting Chaplains at the MGH; two are serving in parish ministry; and one is the chaplain in a private school. The remainder are engaged in further academic study.

In addition to the Chaplains, the Department of Pastoral Services includes a full-time secretary; three lay volunteer Chaplain Visitors who call on patients; and four volunteer office helpers. We are truly grateful for our volunteers and their faithful service to us and to our patients.

CHAPLAIN SCOTT H. GLIDDEN
CHAPLAIN NANCY J. REED
Acting Chaplains

Report for the Committee on Teaching and Education

Over the past year, the Committee on Teaching and Education has carried out three fundamental activities related to its responsibilities for overseeing the Hospital's educational programs: 1) monitoring the quality of the Hospital's ongoing educational programs; 2) reviewing all proposals for new Hospital sponsored educational programs, training grants, and implementing several interdepartmental and interdisciplinary educational programs. Planning for the MGH Education Division, which will grant degrees in seven nursing and allied health professions, has occupied a considerable measure of the Committee's attention in the past. However, acting administrators and faculty for the Division were appointed during 1978, and they now report directly to the Education Division Committee of the MGH Board of Trustees.

The Committee on Teaching and Education conducted a survey this year of all MGH sponsored and affiliated educational programs in nursing and allied health. This survey gathers in one place all the information on these educational activities to serve as a basis for providing answers to inquiries, for evaluating existing programs, and for reviewing proposals for new programs.

The Committee reviewed and approved the one-year Respiratory Therapy Technician Program provided by the Respiratory Care Department in cooperation with Bunker Hill Community College. After long and careful study of a proposed new program in Radiation Therapy Technology, the Committee recommended that the proposal be revised and re-examined. New affiliation agreements were approved with Bunker Hill Community College, Northeastern University, the University of Vermont, North East Louisiana University, and Washington State Community College.

The Committee continues to sponsor a program of orientation required of all new house officers at the MGH. The programs offer instruction in Cardiopulmonary Resuscitation, Invasive Lines, Infection Control, and Respiratory Care. These programs were initiated in 1976 and extensively revised in 1978. Most are in the form of self-instructional units (either written or in slide-tape format) followed by a self-evaluation examination.

A Coordinate Program of Continuing Education in Nursing, Social Work, and Allied Health continues to be offered through the Office of Educational Planning. These interdisciplinary continuing education courses have drawn students from throughout New England.

The Committee on Teaching and Education sponsored for the second year a patient education program. This free health information series offered over 40 hours of television programming available in every patient's room on a special closed circuit channel. The patients were able to choose from a wide selection of health topics from disease management to diet planning. Surveys were taken in order to identify specific patient interests and judging from their comments, this program has proven to be both popular and informative.

DR. HENRY J. MANKIN
Chairman

Report of the Coffee Shop

This past year saw an increase of 15,000 customers and an income of $409,000, but sadly expenses exceeded income. The two largest expenses are salaries of $208,000 and a food cost of $181,000. On the plus side, we do provide good food in an attractive, clean shop served by a fine staff and 11 volunteers who served over 800 hours. Actually, there is an increase in our volunteer number, one of whom is a retired Phillips House nurse and one a member of Mrs. Fern's Patient Activities Center.

Since the resignation of Mr. Thomas Schultz, our liaison with the Hospital Administration, we have been working closely with our great friend, Miss Louise Hatch, Director of the Dietary Department.

Our mini-remodeling has expedited the lines for the cash register and improved our sign system. Menu additions will feature specials such as Chef's Salad, quiches, two soups daily, and other tempting items hoping to increase the per person expenditure.

The Coffee Shop suffered two sad losses in the deaths of Mrs. Alfred Kranes and Mrs. Laurence Robbins, both of whom had worked in the Coffee Shop since its inception. Their interest, devotion, and friendship will never be forgotten by those of us who worked with them.

LOUISE C. RIEMER
Chairman, Coffee Shop Committee

Report of the Utilization Review Committee

The activity of the Utilization Review Committee was highlighted this past year by the MGH's long awaited delegation by the Bay State PSRO. Medicaid and "no insurance" patients when added to Medicare and a 15 percent random sample of all other patients comprised a review population of 12,500 patients for the period from April 1 to December 1, 1978.

Procedurally the changes necessary to meet the PSRO requirements were few. The most major change was the implementation of a system whereby the Medical Records are held on the patient care units one working day post discharge so that the Nurse Coordinators can do a discharge review. This review completes the computer record of the patient's stay and promotes the integrity of a truly concurrent system. Secondly, it was necessary to coordinate the hospital billing system with the UR system as each bill submitted on a Medicare or Medicaid patient must be accompanied by a PSRO certification form. Also under the auspices of the PSRO, the first area-wide Medical Care Evaluation was performed. Seventy-five charts on MGH patients who had a Cholecystectomy were pulled and measured against a preset group of criteria to evaluate the standard of care. Internally the hospital's Quality Assurance Committee will also review and interpret this data.

Having met these objectives, the Committee looks forward to new challenges in 1979 as the MGH attempts to become the forerunner of what is known as a focused review system involving all MGH admissions. The wealth of data collected over the past five years will make it possible to evaluate patients for potential utilization problems on admission. Those patients who fall into previously identified problem categories will make it possible to evaluate patients for potential utilization problems on admission. Those patients who fall into previously identified problem categories will be reviewed concurrently as indicated by preset percentiles for patient stay. Those patients who fall into categories with a low-problem margin will be reviewed again only at discharge to collect any information relevant to the stay. The expectation is that focused review with its variably intensive concurrent review will make utilization review programs more cost effective. A Concurrent Index will make it possible for management to know exactly what the patient population consists of on any given day and thereby increase the ability to predict costs and better manage the increasingly limited health-care dollar. This approach is expected to help maintain the delicate balance necessary between external governmental requirements and internal management responsibilities by the proper utilization of the hospital's resources.

None of the bench-marks that have been met this year would have been possible without the diligent efforts of Medical Records, Clinical Administration, the Lab of Computer Science, and Patients' Accounts as well as other hospital departments, and their continued support plays a large role in the confidence that our 1979 goals will be met.

GEORGE P. BAKER, JR., M.D.
Chairman

Dalton Scholarships

Dalton Scholar Awards will be made to young physicians for significant contributions to the advancement of medical knowledge and for individual promise for continued scholarly work. The fund will be available on a flexible basis to members of the MGH Staff under 40 years of age for:

1. Support of a scholarly endeavor - especially one involving (a) innovation and (b) widespread hospital benefits.
2. Foreign travel by a member of the hospital staff under age 40 with a potential for aiding the hospital's research or educational program.

The fund will be administered by an **ad hoc** committee composed of three members of the General Executive Committee appointed by it (each to serve for three years, with one member rotating off each year), which will consider applications made to the General Executive Committee and will report its recommendations to the General Executive Committee for final action.

Warren Triennial Prize

The Warren Triennial Prize was founded by the late Dr. J. Mason Warren in memory of his father, and his will provides that the accumulated interest of the fund shall be awarded every three years to the author of the best dissertation considered worthy of a premium on some subject in Physiology, Surgery, or Pathological Anatomy, the arbitrators being the General Executive Committee of the Massachusetts General Hospital.

The submission of special theses or essays is no longer required for this competitive prize.

The Warren Prize Lectures, selected for outstanding work in medical science, are nominated to the Trustees by the General Executive Committee.

In 1977 the Warren Triennial Prize was awarded jointly to Dr. Seymour Benzer of the California Institute of Technology and Dr. Walter Gilbert of Harvard University.

PLANNED GIVING
WILLS AND BEQUESTS

The founding of the Massachusetts General Hospital in 1811 and its notable service over the succeeding years have been made possible in large part by generous gifts and bequests. Now, in addition, planned giving arrangements, including the give annuity, the charitable remainder unitrust, the charitable remainder annuity trust, and the pooled income fund, are available—and are being used—to the mutual benefit of donors and the hospital.

Funds may be left by will to the Massachusetts General Hospital in one or more of the following ways:

A cash bequest leaves a specific dollar amount.

A bequest of all or a stated percentage of the residue of an estate gives the hospital all or such stated percentage of the balance of the estate after payment of debts, taxes, expenses of administration, and specific bequests.

A bequest of a remainder of a charitable remainder trust after a life estate in a surviving spouse or other beneficiary(ies) gives the hospital all or a portion of the principal sum of such trust following the death of the spouse or other life beneficiary(ies).

A contingent bequest makes the hospital the beneficiary only in the event that other designated beneficiaries fail to survive the donor.

Should you plan to include the hospital in your will—or should you be interested in one of the types of gifts described above—the hospital could suggest to you or your lawyer specific wording for carrying out your wishes.

Joseph C. Donnelly, Jr., Director of Development (telephone: 726-2200), would be pleased to hear from you and to provide whatever information you or your lawyer may seek.

One Hundred and Sixty-First

Annual Report

of

THE McLEAN HOSPITAL

A Division of
MASSACHUSETTS GENERAL HOSPITAL
1978

Belmont, Massachusetts

MASSACHUSETTS GENERAL HOSPITAL
McLEAN HOSPITAL
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(Children's Services)

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(Adult Services)
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(Children's Services)

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DEPARTMENT OF PSYCHIATRY

Psychiatrist in Chief

Shervert H. Frazier, M.D.

Service Chiefs

Lenore Boling, M.D.
Robert P. Hopkins, M.D.
Silvio J. Onesti, M.D.
George O. Papanek, M.D.
Mark M. Walter, Jr., M.D.
Stephen L. Washburn, M.D.

Director of Child Psychiatry

Silvio J. Onesti, M.D.

Psychiatrists

Ross J. Baldessarini, M.D.
Jonathan O. Cole, M.D.
Edward M. Daniels, M.D.
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Stanley H. Eldred, M.D.
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Alfred H. Stanton, M.D. (until June 30, 1979)

Attending Psychiatrist

Merton J. Kahne, M.D.

Attending Child Psychiatrists

Malvina Stock, M.D.
Arthur F. Valenstein, M.D.

*Effective July 1, 1979

Associate Psychiatrists

Jane M. Berman, M.D.
Lenore A. Boling, M.D.
Richard D. Budson, M.D.
Peter Choras, M.D.
James F. Gilligan, M.D.
John G. Gunderson, M.D.
Stuart T. Hauser, M.D.
Richmond Holder, M.D.
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Phillip Isenberg, M.D.
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Maurice Vanderpol, M.D.
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Stephen L. Washburn, M.D.

Associate Child Psychiatrists

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Martin Miller, M.D.
Peter R. Saltzman, M.D.

Associate Attending Psychiatrists

David Blau, M.D.
Arthur J. Cain, M.D.
Enid Caldwell, M.D.
Alan Fisch, M.D.
Ernest Hartmann, M.D.
Peter B. Jenney, M.D.
Kathryn B. Kris, M.D.
Davide Limentani, M.D.
Don R. Lipsitt, M.D.
Arthur Papas, M.D.
Peter Reich, M.D.
Michael D. Robbins, M.D.
William D. Temby, M.D.

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Jo Ann B. Fineman, M.D.
Malkah T. Notman, M.D.
Elinor M. Siner, M.D.
Howard Weintraub, M.D.
Anna K. Wolff, M.D.

Assistant Psychiatrists

Steve G. Agular, M.D.
Richard I. Altesman, M.D.*
Alan Barry, M.D.
Thomas C. Bond, M.D.
Neal M. Borenstein, M.D.
Valerie J. Buyse, M.D.
Corbett Campbell, M.D.
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Richard Schwartz, M.D.
Lynne A. Wilk, M.D.
Adela G. Wilkeson, M.D.
Paula C. Wolk, M.D.

Assistant Child Psychiatrists

Robert S. McKelvey, M.D.*
Jacqueline Olds, M.D.

Visiting Fellow

Irene Jakab, M.D., Ph.D.

Visiting Research Associate

Martin F. Gardiner, Ph.D.

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*Effective July 1, 1979

Assistant Attending Psychiatrists

Barbara L. Aeschliman, M.D.
William H. Anderson, M.D.
Richard Arnold, M.D.
Daniel Asnes, M.D.
Alan L. Bateman, M.D.
Stephen J. Bergman, M.D.
Jerrold G. Bernstein, M.D.
Martha R. Bobruff, M.D.
John H. Brandt, M.D.
Paul A. Buttenwieser, M.D.
Lloyd M. Caplan, M.D.
Maurice C. Cion, M.D.
Herbert S. Cline, M.D.
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Zonda J. Mercer, M.D.
Martin A. Miller, M.D.
Emanuel Mirel, M.D.
Amos Nahor, M.D.
Morton B. Newman, M.D.
Donald Ottenstein, M.D.
Robert D. Patterson, M.D.
Harry Penn, M.D.
Lloyd F. Price, M.D.
Arthur E. Reider, M.D.
Phelps M. Robinson, M.D.
William A. Rohde, M.D.

Edwin M. Davidson, M.D.
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Lance M. Dodes, M.D.
Amir M. Farhadi, M.D.
Bruce W. Fischberg, M.D.
George Gardos, M.D.
Charlotte R. Goldman, M.D.
Todd F. Holzman, M.D.
Carolyn Ise, M.D.
Burt Johnson, M.D.
Eda M. Kahana, M.D.
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Melvin M. Kayce, M.D.
Rona E. Klein, M.D.
Robert Leff, M.D.
Zenos M. Linnell, M.D.
Stuart Rosenthal, M.D.
Lucy Salomon, M.D.
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Edward S. Schwartzreich, M.D.
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Jeffrey L. Speller, M.D.
Frederick I. Stoddard, M.D.
Larry H. Strasburger, M.D.
Gerd C. Teschke, M.D.
Roland H. Ungerer, M.D.
Jerry Wacks, M.D.
Robert M. Weiner, M.D.
Robert W. Weinstock, M.D.
Frederic E. Whiskin, M.D.
Harold W. Williams, M.D.
Bernard S. Yudowitz, M.D.

Assistant Attending Child Psychiatrists

Steven L. Ablon, M.D.
Paul H. Arkema, M.D.
Ann M. Briley, M.D.
Fredric J. Coplon, M.D.
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Judith A. Yanof, M.D.

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Charles E. Adler, M.D.
#Richard I. Altesman, M.D.
*Richard Bacharach, M.D.
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Thrassos S. Calligas, M.D.
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Richard J. Forde, M.D.
*Richard Frank, M.D.
#Judith Freedman, M.D.
James P. Frosch, M.D.
Deborah A. Greenman, M.D.
*#Winston C. Hughes, M.D.
John J. Kao, M.D.
Philip B. Kraft, M.D.
Paul S. Laffer, M.D.
#Sharyn Ann Lenhart, M.D.
#Marshall E. Lewis, M.D.
#Melvyn L. Lurie, M.D.
Margaret S. McKenna, M.D.
Humphrey Morris, M.D.
*#Charles W. Popper, M.D.
#Margaret S. Ross, M.D.
#Humberto Valdes, Jr., M.D.
Ellen Volkman, M.D.
Warnie L. Webster, M.D.
Sharon R. Weinstein, M.D.
#Roger D. Weiss, M.D.

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*John K. Bartz, M.D.
*Richard Frank, M.D.
#Bruce J. Holstein, M.D.
*#Winston C. Hughes, M.D.
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Kambiz Pahlavan, M.D.
#Dean X. Parmelee, M.D.
*#Charles W. Popper, M.D.
Steven S. Rolfe, M.D.
Lawrence F. Selter, M.D.
#Yvonne Signe Margareta Taylor, M.D.

*Combined program in adult and child psychiatry
#Effective until June 30, 1979

Effective July 1, 1979

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Robert J. Chiarello, M.D.
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Anthony J. Rothschild, M.D.
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Pearson Sunderland, III, M.D.
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Robert J. Waldinger, M.D.

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Sally A. Sveda, M.D.

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Alexander Russinov, M.D., Ph.D.
Bruce A. Sayles, M.D.

Clinical Fellow in Child Psychiatry

Ann E. Saunders, M.D.

Clinical and Research Fellow in Psychiatry

Steven Varga-Golovcsenko, M.D.

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Assistant in Psychology
Hedy S. Wermer, M.A.

Consultant in Electroencephalography
Ira Sherwin, M.D.

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Isaac Greenberg, Ph.D.

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Dennis J. Selkoe, M.D.

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Biochemist
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Mark Froimowitz, Ph.D.
J. David Sakura, Ph.D.

Research Fellow in Biochemistry
Rupert Schmidt, Ph.D.

Assistant Psychobiologist
Kenneth G. Walton, Ph.D.

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Jeffrey Gilbert, M.D.
Joseph F. Lipinski, M.D.
Alexander L. Miller, M.D.

Research Fellows in Psychiatry
Anri Aoba, M.D.
George W. Arana, M.D.

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Walle J.H. Nauta, M.D., Ph.D.

Associate Neuroanatomist
Valerie B. Domesick, Ph.D.

Assistant Neuroanatomist
Jennings N. Naranjo, Ph.D.

Psychologists
Philip S. Holzman, Ph.D.
Brendan A. Maher, Ph.D.

Assistant Psychologists
Dennis K. Kinney, Ph.D.
Bonnie J. Spring, Ph.D.

Assistant Attending Psychologist
Ruth L. Richards, Ph.D.

Clinical Fellows in Psychology
Stephanie A. Adler, A.B.
Smadar Levin, Ph.D.

Associate Psychobiologist
Steven Matthysse, Ph.D.

Assistant Psychobiologist
Kenneth G. Walton, Ph.D.

Assistant Biochemists
Mark Froimowitz, Ph.D.
Charles A. Marotta, M.D.

Visiting Research Fellow
Michael B. Herschel, M.D.

Visiting Fellow
Paola Strocchi, M.D., Ph.C.

DEPARTMENT OF PSYCHOLOGY

Chief Psychologist (Adult Services)
Irene P. Stiver, Ph.D.

Chief Psychologist (Children's Services)
Sebastiano Santostefano, Ph.D.

Psychologists
Philip S. Holzman, Ph.D.
Brendan A. Maher, Ph.D.
Nancy K. Mello, Ph.D.
Norbett L. Mintz, Ph.D.
Robert D. Schnitzer, Ph.D.

Associate Psychologists
Thomas F. Babor, Ph.D.
Richard J. Bonier, Ph.D.
Abram Chipman, Ph.D.
Ronald S. Ebert, Ph.D.
Judith V. Jordan, Ph.D.
Peter B. Lenrow, Ph.D.
Daniel Perschonok, Ph.D.
Marsha Vannicelli, Ph.D.

Associate Child Psychologists
Robert B. Brooks, Ph.D.
Richard Monahan, Ph.D.

Associate Attending Psychologists
Lewis B. Klebanoff, Ph.D.
Norman A. Neiberg, Ph.D.
Scott Reinhardt, Ph.D.
Ralph G. Semon, Ph.D.

Assistant Psychologists
Mary Lou Cheal, Ph.D.
Sara Eddy, Ed.D.
Susan V. Eisen, Ph.D.
Robert Fein, Ph.D.
Beverly Gomes-Schwartz, Ph.D.
Karen Gross, Ph.D.
Barbara P. Jones, Ph.D. (Neurology)
Ann Katz, Ed.D.
Dennis K. Kinney, Ph.D.
Philip G. Levendusky, Ph.D.
Carolynn Maltas, Ph.D.
Wesley E. Profit, Ph.D.
Stephen J. Rothenberg, Ph.D.
Bonnie J. Spring, Ph.D.
Janet L. Surrey, Ph.D.
Gary A. Taylor, Ph.D.
Renate C. Wack ("Diplome Psychologe")

Assistant Child Psychologist
Maria L. Iacobbo, Ph.D.

Assistant Attending Psychologists

Susan Abelson, Ph.D.
Isaac Greenberg, Ph.D.
Ivan Gulas, Ph.D.
Robert Jampel, Ph.D.
Sophie B. Mintz, Ph.D.
Charles M. Rice, Ph.D.
Ruth L. Richards, Ph.D.
Peter Yaffee, Ph.D.
Harvey Waxman, Ph.D.

Assistant Attending Child Psychologists

Sydney L. Altman, Ph.D.
Marsha G. Greenstein, Ph.D.

Associate in Psychology

Jean K. Mason, M.A.

Assistants in Psychology

Roger R. Adams, M.A., M.Sc.
Laura Jennings, M.T.S., Ed.M.
Arthur Klein, M.A.
Betty-Jane Scheff, M.Ed.
Hedy Wermer, M.A. (Neurology)
Laura Zimmerman, M.T.S.

Assistant in Child Psychology

Ava Bry Penman, M.S.

Postdoctoral Fellows

Geraldine Fasnacht, Ph.D.
Joseph Schwartz, Ph.D.
Joseph Shay, Ph.D.

Postdoctoral Fellows in Child Psychology

Virginia L. Austin, Ph.D.
Neil S. Gore, Ph.D.
Allan A. Kamfonik, Ph.D.
Thomas Kreilkamp, Ph.D.

Clinical Fellows in Psychology

Stephanie A. Adler, A.B.
Steven A. Berk, M.Ed., C.A.E.S.
Daniel Brown, M.A.
Sharon S. Burr, M.A.
James A. Buruss, Ph.D.
Mercia J. Dickman, M.A.
David Gottesman, M.A.
Frederick W. Kelso, M.A.
Smadar Levin, Ph.D.
Robert Marblestone, M.A.
Gil G. Noam ("Diplom Psychologe")
Leonard J. Sommer, M.A.

Research Fellow

Louis A. Sass, M.A.

Research Postdoctoral Fellow in Child Psychology

William T. Garrison, Ph.D.

Research Fellows in Child Psychology

Carolyn A. Green, A.B.
Donna K. Oppenheim, Ed.M.

Report of the Director

During fiscal 1978, McLean Hospital moved to consolidate its most significant undertaking of the prior year—the establishment of the Mailman Research Center. It dealt with major new problems which emerged during 1978. And it turned its attention to long-range planning for the years ahead.

Research, Patient Care, Teaching

The first year of operation of the Mailman Research Center has been highly successful. As the Report of the Psychiatrist in Chief indicates, investigations in several major areas of neuropsychiatric research are well underway under the direction of prestigious scientists both old and new to McLean Hospital. Staff at the center's Laboratories for Psychiatric Research, and Ralph Lowell Research Laboratories with a newly established "brain bank," represent a strong, collaborative, interdisciplinary effort toward unravelling the causes of the major mental illnesses.

During the year, a Scientific Advisory Committee was established to oversee McLean's growing research activities. Following the pattern at the Massachusetts General Hospital, the new McLean Committee will report directly to the Trustees. McLean's existing Research Committee will serve as host to the new committee and assist in its activities.

Other hospital research activities, clinical programs and teaching efforts also proceeded well. The McLean census was high throughout the year and the hospital treated almost 4,000 patients. It trained about 1,000 professionals in mental health and allied fields at McLean through its residency and teaching affiliation programs and its Facility for Continuing Education.

Fiscal Affairs

Financial planning and cost control efforts over recent years have worked effectively. For the fourth year in a row, McLean Hospital ended 1978 with a modest surplus of funds needed for ongoing renovation of its many old buildings.

These results are increasingly difficult to reach in these times when outside funding for training has been declining, when research programs have been deemed nonreimbursable by third-party payors, and when our ability to establish rates to recoup patient care expenditures is constrained by state cost control regulations.

Fund Raising and Public Relations

Private philanthropic resources, which have done so much to make McLean what it is today, are more important than ever. This year marked the tenth anniversary of McLean's establishment of a fund-raising department of its own separate from that of the General Hospital. Those ten years, during which Mr. Winston Johnson headed the Development Department, were highly successful ones in which McLean raised moneys to construct the Hall-Mercer Children's Center and the Mailman Research Center. Within three years, McLean raised over $3 million for the latter center, wholly from private philanthropy. Upon Mr. Johnson's leaving McLean this year for a position at Harvard University, Mr. Jack W. Christensen, an executive with extensive fund-raising experience, was appointed Director of Development. It is our expectation that the hospital will continue to find the financial support it needs to fulfill its mission as a private psychiatric institution.

That support also rests on public relations efforts to create understanding of what McLean is and is doing to meet the country's mental health needs. For efforts along these lines in 1978, the hospital's Public Relations Department won five awards: two national MacEachern Awards from the Academy of Hospital Public Relations and three regional awards from the New England Hospital Public Relations Association.

Also, to foster public recognition of McLean's growing number of programs, the hospital adopted a new logo. This symbol now appears on all hospital stationeries and is being added to various program brochures and other printed materials.

Events of the Year

The year presented two unusual situations that tested the resiliency of the hospital community. The first was the major snowstorm of early 1978 which resulted in Massachusetts declaring a week-long state of emergency. Staff and employees came in to assure that essential patient care and all the services that support it continued. They arrived in emergency vehicles, and on skis and snowshoes, many to work 16 and 24 hours at a stretch and to sleep in makeshift dormitories at the hospital. At week's end, there was no question of the ability of the hospital community to rally in an emergency.

The second situation involved a union drive among employees in the Plant and Operations Department by the Maintenance Trades Council of New England. The hospital responded through a variety of legally possible approaches to investigate matters of concern and to respond appropriately to the issues raised. The union election held February 23 resulted in a vote of 42 to 16 against union representation. Following the election, several organizational changes were made to resolve troublesome issues, and a search began for a candidate for a new position, Assistant Director for General Services, to oversee that and other service departments.

Looking to the Future

It was in 1965 that McLean undertook its last major, formal effort to develop a long-range development plan to assure its future viability. Though ambitious, most of its basic objectives have been met during the intervening years. Those years have seen a proliferation of specialty patient care programs; development of partial hospital, outpatient and community residence programs; expanded teaching and research activities; the building of the Children's Center and Mailman Research Center; and the ability to attract top professionals to work in the hospital's clinical, research, teaching and administrative areas.

During fiscal 1978, McLean set out again to develop a formal plan for the hospital's future. A "Long-Range Planning Committee" was appointed to assess future problems and opportunities the institution must position itself to deal with in the years ahead.

The factors this committee will be evaluating are far more complex than those of its 1965 counterpart. In many ways the economic, political and regulatory climate of today is inimicable to the private sector and does not bode well for the future. As in many institutions, long-range goals will have to be set against a background of seemingly infinite expectations for services and finite resources to allocate among competing compelling needs.

Summary

The events of 1978 reflect McLean's determination to carry out its clinical, research and teaching missions with distinction and to continue doing so over the long-term future. While the challenges it faces in maintaining that tradition are great, so is the support it continues to find among Trustees, hospital staff and employees, donors, Auxilians and volunteers. We are grateful to them.

FRANCIS de MARNEFFE, M.D.
Director

Report of the Psychiatrist in Chief

During fiscal 1978, the clinical, research and training programs of the McLean Hospital were substantially strengthened.

Research

The most significant changes of the year occurred in research. At the Mailman Research Center, The Laboratories for Psychiatric Research with a contingent of scientists from the Massachusetts General Hospital, Harvard University and the Massachusetts Institute of Technology, completed its first full year of operation at McLean under Dr. Seymour Kety. Programs include expanded activities in human genetics and psychobiology led by Dr. Kety and Dr. Steven Matthysse; in neuropharmacology and psychopharmacology by Dr. Ross Baldessarini; in neuroanatomy by Dr. Walle Nauta; in experimental psychology by Dr. Philip Holzman; in preclinical neurochemistry of brain protein synthesis by Drs. Jeffrey Gilbert and Charles Marotta, in cooperation with Dr. Alexander Miller's research in brain intermediary metabolism; and in clinical research by Dr. Joseph Lipinski. Dr. Baldessarini was made Acting Director of the Laboratories upon Dr. Kety's sabbatical leave at the Center for Advanced Study in the Behavioral Sciences at Stanford, California.

These Laboratories, together with the Ralph Lowell Research Laboratories under Dr. Alfred Pope, also at the Mailman Research Center, have produced one of the nation's most exciting interdisciplinary programs of basic and applied biomedical research aimed at a better understanding of major neuropsychiatric illnesses. Major changes at the Lowell Laboratories during the year included the establishment of a "brain bank," under Dr. Edward Bird, to store and distribute postmortem brain tissues to qualified investigators worldwide; and the relocation of Dr. Dennis Selkoe's laboratory operations there from the Children's Hospital Medical Center. The latter focuses on the chemistry of neuronal fibrous proteins.

At the hospital's Alcohol and Drug Abuse Research Center, staff pursued investigations of heroin addiction, polydrug abuse, and alcohol abuse, publishing 49 related papers, with an additional 44 in press. Drs. Jack Mendelson and Nancy Mello, Director and Associate Director respectively of the Center, were corecipients of the 1978 Jellinek Memorial Fund Award for outstanding contributions in alcoholism research.

Significant among the many other investigations underway at McLean is the continuing work of the hospital's Evaluative Service Unit in monitoring and assessing clinical programs and practices. In 1978, that unit carried on studies of social work services, rehabilitation programs, factors relevant to readmission, and the relationship of overnight patient leaves to treatment outcome.

Patient Care

The hospital's inpatient services treated 1,520 patients during fiscal 1978. Its outpatient clinics, partial hospitalization and community residence programs collectively served 2,359 patients.

The demand for services for many hospital programs remained high. The Appleton Treatment Center for Alcoholism served a record number of individuals in its inpatient and one-year old outpatient service and received contracts to provide alcoholism services to a group of Massachusetts state employees and a major Boston hospital. Patient visits to the Adult Outpatient Clinic increased by 2,000 over the prior year. The geriatric service was reorganized, and providing more aftercare services has become a major focus here. This focus has also been evident at the hospital's Behavior Therapy Unit and continues at the Hall-Mercer Children's Center where 34 percent of the children treated at its outpatient service were transferred from its inpatient program for continuing care.

The Committee on Adolescence issued its report on better coordinating the hospital's many programs serving adolescents and much progress in this direction was made during the year.

The Medical, Neurology, Psychology, Nursing, Social Work, and Rehabilitation Services Departments all made major contributions to the hospital's patient care programs during the year.

Teaching

The hospital continues its role in training students for professions in all the mental health disciplines, and many allied fields, including medicine, neurology, special education and the ministry. The hospital has a child psychiatry residency program, an adult residency program, and a third combined program. As a result of a resident task force study, the adult program completed a thorough self-evaluation during the year and began exploring ways of implementing several program changes.

The Facility for Continuing Education sponsored 26 different C.M.E. activities for practicing professionals during the year. They were attended by 500 community psychiatrists and physicians and some 1,160 enrollments involved McLean staff. It is estimated that fifty thousand physicians throughout the country participated in McLean C.M.E. activities through television, audio tapes and printed presentations.

In May of 1978, a site visit by the Committee on Education of the Massachusetts Medical Society resulted in a two-year reaccreditation of McLean Hospital to sponsor Category I C.M.E. activities.

Summary

Underlying the hospital's overall efforts in 1978 in patient care, research and training were two main goals. The first was to consolidate and direct new programs to maximize the new potential contributions they promise. The other was to continue to evaluate and assess ongoing programs to increase their effectiveness. Both objectives are crucial to maintaining McLean's leadership position in the field of psychiatry, and substantial progress in meeting both was made during fiscal 1978.

SHERVERT H. FRAZIER, M.D.
Psychiatrist in Chief

Report of the Administrator

McLean's flexibility in planning building and modernization projects was increased when the State Determination of Need Statute governing hospital expansion and modernization activities was amended in 1978, raising the capital expenditure requiring state approval from $100,000 to $150,000, and exempting eligible research and educational projects from the DON process.

Three building studies, completed in 1978 are being evaluated—a Building Code Survey, a Fire Safety Evaluation Report, and a Survey of Building Accessibility for Handicapped Individuals.

During 1978, $649,333 was spent on capital improvements, including $190,585 on equipment and patient furnishings.

Projects included modifying patient facilities and installing central air conditioning in Hall-Mercer; installing a specimen incinerator; upgrading Berkeley House and Mill Street Lodge; work on electrical, heating and sprinkler systems on various patient halls; continued expansion of the fire alarm system; installation of a new and larger water main; and other plant-upgrading efforts.

Four Bowditch II beds were decertified by the Department of Public Health which ruled the licensed inpatient beds could not be used for research subjects, but the intent is to return these beds to patient service in January 1979.

The Utilization Review system worked well during 1978: 1,357 admissions and 1,607 extended duration reviews were completed and all but one patient were certified as requiring inpatient treatment. Two retrospective medical audits and four Evaluative Service Units studies were completed.

The hospital experienced an increasing number of retroactive Medicare denials due to differences between Medicare reviewers and hospital staff as to what constitutes active treatment for certain patients, and denials are being appealed when indicated.

The second year of participation in the Harvard Medical Institutions Insurance Program has gone well with a minimal number of malpractice claims against the hospital. Private practice coverage for physicians participating as expert witnesses and providing professional services in various legal proceedings has been added to the program for the remainder of the policy year.

Concerns expressed by psychiatric hospitals around the country, including McLean, regarding the multiple category surveys required by the Accreditation Council for Psychiatric Facilities of the Joint Commission on Accreditation of Hospitals has resulted in the council developing standards for one integrated survey. Unfortunately, this program will not be in place for the hospital's scheduled 1979 survey.

It is refreshing to note that the JCAH has recognized the cost impact of its standards and procedures by adopting a policy to assure that cost will be considered in any JCAH actions that affect the provision of health care and related services.

McLean responded to other regulatory agencies during the year, by submitting one and five year plans to the state and by participating in a survey of inpatient psychiatric services by the Health Planning Council for Greater Boston. The aim of the latter is to assist in the development of "Standards and Criteria for Psychiatric Services in Massachusetts" and to make recommendations regarding their implementation. Emphasis is being placed, however, on increasing the acute psychiatric bed capacity in general hospitals as state hospitals are phased down, and not enough attention is being paid to the role of the specialty psychiatric hospitals in Massachusetts in long-range planning on mental health services in the Commonwealth.

At the national level, the American Hospital Association has established a Center for Mental Health and Psychiatric Services. Even though only 11 percent of its Psychiatric Services members are specialty psychiatric hospitals, it is anticipated that the AHA will work closely with the National Association of Private Psychiatric Hospitals and the Federation of American Hospitals in representing the interests of hospital psychiatry.

Representation and advocacy in Washington is particularly critical today as it relates to national health insurance and cost controls. It is essential that hospitals, particularly through their national organizations, provide the necessary leadership and staff support to effectively impact on and monitor legislation and regulations affecting the delivery of mental health services.

HENRY J. LANGEVIN, M.S.H.A.
Administrator

Report of the Assistant Director for Fiscal Affairs

Financial results for 1978 continued a four-year trend toward an improved and more viable financial position for McLean Hospital, marked by the generation of a modest surplus in each of the past four years; a reduction of patients' Accounts Receivables of $308,000 during 1978 and in excess of $3 million since September, 1975; a reduction in amounts owed to the corporation of $1.1 million during 1978; and continued support for training and research programs at a time when outside funding for training has been declining and research programs have been deemed nonreimbursable by third-party payors.

Among the many financial planning and control efforts which have made these results possible are:

1. Careful joint reviews of patient's financial situations by clinical and business office staff so that treatment programs can be planned to make the best possible use of the resources available.
2. Organizing each program or service as a responsibility center with its own program purpose, staff and other resources necessary to fulfill that purpose. Each center projects its budgets for approval for the year ahead, and throughout that year receives a computerized printout indicating actual expenditures for the month and year-to-date with comparisons to their approved budget projections. Early indications of variances allow responsible individuals to take any necessary corrective actions.
3. Maintaining a position control system both to insure staffing levels necessary for providing quality patient care and to insure that payroll costs are effectively controlled. The system identifies every hospital position by salary grade and hours worked, and no new positions are added without vigorous justification of their need and without the approvals of the Psychiatrist in Chief for clinical staff and the Hospital Director for all staff. Since hospitals in general are labor intensive organiza-

tions and payroll-related costs account for 80 percent of McLean expenses, the system is a key hospital cost control mechanism.

4. Adoption of businesslike approaches to the management of patients' accounts receivable to keep monies due within industry standards. This has reduced moneys McLean has had to borrow to meet working capital requirements, which, in turn, has decreased interest expenses for such loans and hence inflationary pressure on hospital charges. Another byproduct has been a reduction in uncollectable accounts since the longer accounts are unpaid, the less likely the indebtedness will be recovered.
5. Competitive bidding and participation in hospital association mechanisms for group purchasing of services and supplies.

Now, anyone who has been exposed to, or is knowledgeable about, common business practices will find nothing new or startling in the items used by McLean to manage its operations. That is precisely the point. There is no magic cure-all or secret formula that we have found to be the panacea for problems associated with running a major teaching and research hospital like McLean.

What is perhaps unique, and what has been important to our achievements in the fiscal area, is the continued awareness of fiscal limitations and the consistent application of proven management tools and techniques. They are part and parcel of the everyday decision making process at McLean—decision making at all levels of the organization, not just at the top. This recognition of the need for sound fiscal management and the willingness to consider the fiscal implication of day-to-day decisions has been a key factor in McLean's ability to exercise effective cost control.

ARNOLD R. SAITOW, M.B.A., F.H.M.F.A.
Assistant Director for Fiscal Affairs

ADMISSIONS TO INPATIENT SERVICE 1977-1978
BY PREVIOUS HOSPITAL EXPERIENCE, SEX, AND OTHER RELATED CHARACTERISTICS

SCHEDULE A:	1st to Any Hosp.				1st to McLean				Readm. to McLean				Total Admissions			
SOURCE	M	F	T	%	M	F	T	%	M	F	T	%	M	F	T	%
HOME	173	148	321	73	78	74	152	40	67	60	127	56	318	282	600	58
GENERAL HOSPITAL	34	30	64	15	5	18	23	6	12	18	30	13	51	66	117	11
MENTAL HOSPITAL	0	0	0	0	96	77	173	46	15	13	28	12	111	90	201	19
OTHER & NOT DETERMINED	26	25	51	12	14	17	31	8	25	18	43	19	65	60	125	12
TOTAL	233	203	436	100	193	186	379	100	119	109	228	100	545	498	1043	100
SCHEDULE B: DIAGNOSIS																
PSYCHOSES ASSOCIATED WITH ORGANIC BRAIN SYNDROMES	6	12	18	4	8	4	12	3	2	2	4	2	16	18	34	3
NON PSYCHOTIC ORGANIC BRAIN SYNDROMES	1	0	1	0	1	0	1	0	0	0	0	0	2	0	2	0
MENTAL RETARDATION	0	2	2	0	1	2	3	1	0	0	0	0	1	4	5	0
SCHIZOHRENIA	18	11	29	7	49	30	79	21	47	22	69	30	114	63	177	17
MAJOR AFFECTIVE DISORDERS	20	12	32	7	34	33	67	18	29	25	54	24	83	70	153	15
OTHER PSYCHOSES	5	8	13	3	11	14	25	7	3	8	11	5	19	30	49	5
NEUROSES	26	33	59	14	12	23	35	9	3	6	9	4	41	62	103	10
PERSONALITY DISORDERS	44	35	79	18	30	39	69	18	8	29	37	16	82	103	185	18
ALCOHOLISM	58	46	104	24	23	23	46	12	21	13	34	15	102	82	184	18
DRUG DEPENDENCE	9	2	11	3	3	0	3	1	0	1	1	0	12	3	15	1
TRANSIENT SITUATIONAL DISORDERS	20	23	43	10	15	15	30	8	3	3	6	3	38	41	79	8
BEHAVIOR DISORDERS OF CHILDHOOD AND ADOLESCENCE	25	12	37	8	5	0	5	1	2	0	2	1	32	12	44	4
DIAGNOSIS DEFERRED & OTHERS	1	7	8	2	1	3	4	1	1	0	1	0	3	10	13	1
TOTAL	233	203	436	100	193	186	379	100	119	109	228	100	545	498	1043	100

SCHEDULE C:
AGES

3-13	35	15	50	11	6	2	8	2	3	1	4	2	44	18	62	6
14-20	70	56	126	29	72	42	114	30	23	18	41	18	165	116	281	27
21-30	35	43	78	18	54	51	105	28	44	27	71	31	133	121	254	24
31-40	27	26	53	12	17	22	39	10	14	15	29	13	58	63	121	12
41-50	31	18	49	11	19	19	38	10	19	21	40	17	69	58	127	12
51-60	13	16	29	7	13	22	35	9	5	13	18	8	31	51	82	8
61-70	11	14	25	6	7	16	23	6	6	9	15	7	24	39	63	6
71-80	10	10	20	5	5	10	15	4	5	4	9	4	20	24	44	4
81 +	1	5	6	1	0	2	2	1	0	1	1	0	1	8	9	1
TOTAL	233	203	436	100	193	186	379	100	119	109	228	100	545	498	1043	100

TABLE II
INPATIENT POPULATION 1977-1978

Beginning of Year October 1, 1977		Admitted During Year			Discharged During Year			Remaining at End September 30, 1978	
In Hospital	261		1043			1048		In Hospital	280
On Visit	216							On Visit	192
	477								472
		Male	545	52.25%	Male	537	51.24%		
		Female	498	47.75%	Female	511	48.76%		

DISCHARGED PATIENTS:

AGES	M	F	T	%
3-13	37	14	51	5
14-20	155	116	271	26
21-30	133	122	255	24
31-40	57	67	124	12
41-50	70	62	132	13
51-60	35	55	90	9
61-70	26	41	67	6
71-80	22	24	46	4
81 +	2	10	12	1
TOTAL	537	511	1048	100

DIAGNOSIS:

PSYCHOSES ASSOCIATES WITH ORGANIC BRAIN SYNDROMES	19	13	32	3
NON PSYCHOTIC ORGANIC BRAIN SYNDROMES	3	2	5	0
MENTAL RETARDATION	4	3	7	1
SCHIZOPHRENIA	103	79	182	17
MAJOR AFFECTIVE DISORDERS	85	86	171	16
OTHER PSYCHOSES	15	34	49	5
NEUROSES	32	57	89	9
PERSONALITY DISORDERS	100	115	215	21
ALCOHOLISM	107	76	183	17
DRUG DEPENDENCE	12	3	15	1
TRANSIENT SITUATIONAL DISORDERS	25	25	50	5
BEHAVIOR DISORDERS OF CHILDHOOD AND ADOLESCENCE	28	10	38	4
DIAGNOSIS DEFERRED & OTHERS	4	8	12	1
TOTAL	537	511	1048	100

TABLE III
DISCHARGE FROM INPATIENT SERVICE 1977-1978 BY SEX AND SELECTED OTHER CHARACTERISTICS

DESTINATION:	M	F	T	%
HOME (PARENTAL OR MARITAL)	403	400	803	77
PSYCHIATRIC HOSPITAL (OR PSYCHIATRIC WING OF GENERAL HOSPITAL)	50	46	96	9
GENERAL HOSPITAL OR NURSING HOME	7	23	30	3
SCHOOL	10	5	15	1
FOSTER HOME	5	0	5	0
APARTMENT	12	12	24	2
HALFWAY HOUSE	40	18	58	6
DECEASED	3	5	8	1
OTHER	7	2	9	1
TOTAL	537	511	1048	100

CONDITION:	M	F	T	%
RECOVERED	2	2	4	0
MUCH IMPROVED	107	114	221	21
MODERATELY IMPROVED	188	195	383	37
SLIGHTLY IMPROVED	119	90	209	20
UNIMPROVED	115	105	220	21
WORSE	3	0	3	0
DECEASED	3	5	8	1
NOT DETERMINED	0	0	0	0
TOTAL	537	511	1048	100

LENGTH OF HOSPITALIZATION:	M	F	T	%
0-10 Days	39	57	96	9
11-30 Days	81	72	153	15
31-90 Days	296	257	553	53
91-180 Days	61	69	130	12
181-365 Days	37	33	70	7
366-730 Days (1-2 yrs.)	17	17	34	3
731-1825 Days (2-5 yrs.)	5	5	10	1
1826 Days + (5 yrs. and over)	1	1	2	0
TOTAL	537	511	1048	100

Directory

ALUMNI AND PRESENT MEMBERS OF THE HOSPITAL STAFF

Present members of the Hospital Staff are indicated by (*)

The following abbreviations are used:

B.C.H.—Boston City Hospital, 818 Harrison Ave., Boston, Mass. 02118
B.H.H.C.—Bunker Hill Health Center, 73 High Street, Charlestown, Mass. 02129
B.I.H.—Beth Israel Hospital, 330 Brookline Ave., Boston, Mass. 02215
B.H.W.—Boston Hospital for Women, Lying-In Division, 221 Longwood Ave., Boston, Mass. 02115
B.U.H.—Boston University Hospital, 750 Harrison Ave., Boston, Mass. 02118
C.H.C.—Chelsea Health Center, Chelsea, Mass. 02150
C.H.M.C.—Children's Hospital Medical Center, 300 Longwood Ave., Boston, Mass. 02115
D.S.H.—Danvers State Hospital, 450 Maple Street, Danvers, Mass. 01923
H.M.S.—Harvard Medical School, 25 Shattuck Street, Boston, Mass. 02115
H.S.D.M.—Harvard School of Dental Medicine, 188 Longwood Ave., Boston, Mass. 02115
H.S.P.H.—Harvard School of Public Health, 665 Huntington Ave., Boston, Mass. 02115
L.M.H.C.—Lindemann Mental Health Center, Government Center, Boston, Mass. 02114
L.S.H.—Lemuel Shattuck Hospital, 170 Morton Street, Jamaica Plain, Mass. 02130
McL.—McLean Hospital, 115 Mill Street, Belmont, Mass. 02178
M.E.E.I.—Massachusetts Eye & Ear Infirmary, 243 Charles Street, Boston, Mass. 02114
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Veits, Harold R.

Bar Harbor

Gilmore, Edward B.
Haynes, Ormond L., Jr.

Bath

Burden, Charles E.

Brunswick

Macomber, Donald

Cape Elizabeth

Stocks, Joseph F.

Cumberland Forestside

MacDougal, Bruce A.

Ellsworth

Suyama, Eji

Friendship

Frost, Harold M.

Harrison

Smith, Charles M.

Lewiston

Bach, Michael C.

Poland Springs

Davidson, Gerald E.

Portland

Bidwell, Robinson LeR. II
Crothers, Omar D. III
Fritz, Ronald E.
Gilbert, Stuart G.
Hawkes, Richard S.
Hiebert, Clement A.
Leonard, Lawrence M.
Thompson, Philip P., Jr.
Ware, Roland G., Jr.

Readfield

McPhedran, Alexander M.

MARYLAND

Baltimore

Burdick, James F.
Firminger, Harlan I.
Freedberg, Irwin M.
Friedman, Stanford B.
Fritz, William F.
Gale, Arnold D.
Hoffman, Andrew R.
Hoover, Herbert
Howard, John E.
Imbembo, Anthony L.
Johnson, Richard T.
King, W. Bradley, Jr.
Littlefield, John W.

Marshall, Fray F.
Mayer, Richard F.
McIntyre, Patricia A.
Middlebrook, Gardner
Moser, Hugo W.
Panny, Susan R.
Pollard, Thomas D.
Ryan, James J.
Stene, John K., Jr.
Talalay, Paul
Talamo, Richard C.
Trowbridge, Frederick L.
Von Kessler, Kirby L.C.
Walser, Mackenzie
Weisfeldt, Myron L.
Weiss, Howard D.
Zuidema, George D.

Bethesda

Ashbury, Robert F.
Auerbach, David A.
Berzofsky, Jay A.
Borer, Jeffrey S.
Botstein, Paula M.
Brewer, H. Bryan, Jr.
Brown, Crawford S.
Burke, Robert E.
Chase, Thomas N.
Chernoff, A.I.
Cole, Enser W. III
Collins, Robert E.
Crystall, Ronald G.
Eron, Lawrence J.
Fisher, Richard I.
Gardner, David G.
Grave, Gilman D.
Grunfeld, Carl
Herberman, Ronald B.
Hodes, Richard J.
Hooper, David C.
Hosea, Stephen W.
Howley, Peter M.
Kornblith, Paul L.
Krudy, Adrian G.
Levis, William R.
Levy, Ronald
Lipson, Lewis C.
Marx, Stephen J.
Mathisen, Douglas J.
Meltzer, Monte S.
Minna, John D.
Mudd, S. Harvey
Parrillo, Joseph E.
Post, Robert M.
Reppert, Steven M.
Rogentine, George N., Jr.
Rose, Morton H.
Sachs, David H.
Scardino, Peter T.
Schaner, Everett G.
Schott, Chester F.
Schulman, Joseph D.
Scolnick, Edward M.
Scott, William C. II
Shama, Steven K.
Shamberger, Robert C.
Smith, Barry H.
Spiegel, Allen M.
Tenpas, John H.
Tomford, William W.
Waldmann, Thomas A.
Webster, Henry deF.
Wolff, Jan
Young, Neal S.
Zuelzer, Wolf W.

Chevy Chase

Anderson, Frank H.
Bercu, Barry B.

Colesville-Silversprings

DePriest, Oscar S.

College Park

Cantor, Frederick

Columbia

Currie, Richard A.

Easton

Gieske, Judith P.

Kensington

Brooks, Benjamin G.

Owings Mills

Greene, D. Crosby, Jr.

Rockville

Burns, Barbara
Cohen, Max H.
Klerman, Gerald L.
Reiger, Darrel A.

Silver Spring

Harden, Lewis B.
Mirkin, Gavriel B.
Waldmann, Katherine S.

Sparks

Isaacs, James P.

Towson

Adams, John E.

MASSACHUSETTS

Abington

Squires, Homes J.

Andover
Borland, Joanne K.Y.
Seeley, Clinton B.
Weyman, Walter T.
Arlington
Burbank, Charles B.
Cipolloni, Patsy B.
Herzan, Helen M.
Olin, Morton
Pollard, John T., Jr.
Saunders, Gordan A.
Auburndale
Levine, Herbert W.
Ayer
Bock, Arlie V.
Bedford
Clifford, H. Henry
Belmont
Baldessarini, Ross J.
Bird, Edward D.
Bornstein, Irving D.
Crone, Neil L.
deMarneffe, Francis L.A.
Dierker, Louise A.
Farnsworth, Dana L.
Fern, Donald J.
Fischberg, Bruce W.
Gilbert, Jeffrey M.
Howard, Paul M.
Kagan, Jerome
Kety, Seymour S.
Kuehnle, John C.
Lipinski, Joseph F.
Maratta, Charles a.
Miller, Alexander
Mueller, H. Peter
Norcross, John W.
Parmelee, Dean X.
Popper, Charles W.
Ross, Margaret S.
Selter, Lawrence F.
Sleeper, Edward L.
Stanton, Alfred H.
Toll, Karel van Syckel
Walter, Mark M., Jr.
Washburn, Stephen L.
Weingarten, Charles H.
Wilkeson, Adele G.
Beverly
Alt, Richard E.
Bacon, William B.
Caudill, Estill L.
Hewson, James S.
Lamkins, Burham E.
MacDonald, Alexander S., Jr.
Maloney, Randolh D.
Otto, William J., jr.
Parkhurst, Albert E.
Risely, Thomas S.
Shea, Thomas E.
Boxford
Fowler, Joseph W. III
Boston
Abbott, John A.
Abbott, William M.
Abernathy, Robert S.
Abramowitz, Harold
Ackerman, Edward S.
Ackerman, Robert H.
Adams, John, Jr.
Adams, John B.
Adams, Raymond D.
Adams, William P.
Addison, Rita M.
Adrian, Robert M.
Aisenberg, Alan C.
Akins, Cary
Albright, Nile
Ali, Hassen H.
Allee, Paul E.
Allen, Benjamin F.
Allen, Henry F.
Allen, John R.
Allyn, Thomas R.
Alonso, Anne W.
Alpert, M. Elliot
Alpert, Nathaniel M.
Altesman, Richard I.
Althausen, Alex F.
Altman, Sydney
Amadio, Peter C.
Amento, Edward P.
Ames, Adelbert III
Amrein, Philip C.
Anderson, Thomas P.
Anderson, William H.
Andrew, Norman W.
Andrews, Ellen M.
Annenberg, Sarabelle
Antonio, Robert P.
Antoon, Alia Y.
Arees, Edward A.
Aretz, Thomas H.
Armentano, Marie E.
Arndt, Kenneth A.
Arnow, David

Aronow, Saul
Arpin, Elaine J.
Askeroff, Bernard R.
Astrom, Karl E.
Athanasoulis, Christos A.
Atkins, Leonard
Atnip, Robert G.
Atweh, Samir F.
Auchincloss, Hugh Jr.
Auge, Claudine
Ausiello, Dennis A.
Austen, K. Frank
Austen, W. Gerald
Autor, Sherry B.
Averill, Robert M., Jr.
Avruch, Joseph
Axelrod, Lloyd
Baden, Howard P.
Badger, Theodore L.
Badger, Thomas M.
Baker, Ann L.S.
Baker, George P.
Baker, Myles P.
Baker, William H.
Balboni, Victor G.
Baldwin, John C.
Ballantine, H. Thomas, Jr.
Ballentyne, Keith
Baltarowich, Oksans H.
Band, Richard L.
Banks, Henry H.
Barker, Robert H.
Barlow, John S.
Barnes, Ann B.
Barnes, Benjamin A.
Barnett, G. Octo
Barr, Joseph S., Jr.
Barry, Herbert, Jr.
Barsh, Lawrence I.
Barsky, Arthur J.
Bartlett, Marshall K.
Bartlett, Scott P.
Bassil, Barbara
Basta, Salvatore J.
Batch, Kenneth H.
Bates, Robert J.
Battit, George E.
Baughman, Kenneth L.
Bauman, Margaret L.
Bauman, Roger A.
Beal, Myron F.
Bear, David M.
Beardslee, William R.

Beaucher, Wilfred
Beck, William
Behringer, Glenn E.
Beitins, Inese Z.
Bellows, Wayne H.
Belsky, Elizabeth
Benacerraf-Libby, Beryl
Bender, Stephen A.
Benfari, Mary Jane F.
Benz, Ronald R.
Berenberg, William
Beresin, Eugene V.
Bergman, Ira
Berkelman, Ruth L.
Berkowitz, Ivor D.
Berman, Donald E.
Berman, Jeffrey
Bernad, Peter
Bertolami, Charles N.
Bhan, Atul K.
Bhuva, Dinesh N.
Biener, Lois B.
Biggs, Peter J.
Bindman, Arthur J.
Bingham, John B.
Bird, Kenneth L.
Bishop, Linda A.
Biswas, Chitra
Blachman, Paul S.
Black, Paul H.
Black, Peter M.
Black, Robert M.
Blacker, Edward
Blackschaffer, William
Blackshear, Perry J.
Bland, Edward F.
Blank, Irvin H.
Blitzer, Peter H.
Bloch, Alan
Bloch, Kurt J.
Block, Peter C.
Bloom, Edward R.
Blum, Jay E.
Bode, Hans H.
Bodnar, Andrew G.
Bojar, Robert M.
Bondoc, Conrado C.
Bongiovanni, Gail L.
Bonventre, Joseph V.
Borah, Gregory L.
Borges, Lawrence F.
Borofsky, Gerald L.
Borofsky, Richard M.

Borus, Jonathan F.
Boyde, Robert J.
Boyer, Arthur L.
Brand, Don J.
Braslow, Nelson M.
Brem, Steven
Breslau, Barbara E.
Bresnick, James H.
Brewster, David C.
Bridges, Kenneth R.
Bringhurst, Franklin R.
Briselli, Michael F.
Brodsky, Gilbert L.
Brotschi, Erica A.
Brown, C. Alan
Brown, Gregory L.
Brown, Robert H.
Brown, Stephen G.
Brown, Thornton
Browne, Thomas R.
Brownell, Gordon L.
Bruner, John M.R.
Bruns, Romaine W.
Brushart, Thomas M.
Bucher Nancy L.R.
Buck, Allen W.
Buckley, Mortimer J.
Bucuvalas, John C.
Burke, Jack D.
Burke, John F.
Burnham, Charles A.
Burstein, Nelson A.
Bursztajn, Harold
Burton, James A.
Burton, Robert C.
Bush, Michael A.
Bushnell, Leonard S.
Butch, Rodney J.
Butterly, John R.
Buttle, David J.
Byers, Randolph K.
Cabaj, Robert P.
Cahen, Lucienne
Calderwood, Stephen B.
Callahan, Alfred S.
Cambria, Richard P.
Caminha, Fernando T.
Campbell, Crawford J.
Campion, Edward W.
Cancelosi, Susan E.
Caner, G. Colket
Cannellos, George P.
Cannon, Bradford
Caplan, Robert A.
Carabello, Blase A.
Carey, Robert W.
Carlson, William D.
Carney, Walter P.
Carr, Daniel B.
Carrillo, Juan E.
Carroll, Charles F.
Carter, Edward F.
Carter, Edwin L.
Casola, Giovanna
Cass, John W.
Cassem, Edwin H.
Casten, Virgil G.
Castleman, Benjamin
Castronovo, Frank P., Jr.
Caviness, Verne S., Jr.
Chakrabarti, Kishanlal
Chan, William B.
Chandler, Hugh P.
Change, Gloria J.
Chapin, David S.
Chapman, Earle M.
Chapman, Paul H.
Chapman, William G.
Chappell, Ginger
Chayet, Neil L.
Chedekel, David S.
Chen, Tchaw Ren
Chesler, David A.
Chiappa, Keith H.
Chin, William W.
Chivian, Eric S.
Choi, Chan H.
Chou, Duo H.D.
Chou, Iih-Nan
Christopher, Charles W.
Chuong, Robert
Churchill, W. Hallowell, Jr.
Clark, Mary B.
Clark, Richard A.
Clarke, Carolyn C.
Clemmens, David R.
Cleveland, Robert H.
Clifford, Stewart H.
Cloherty, John P.
Clouse, Melvin E.
Cochi, Stephen L.
Cochran, William D.
Codington, John F.
Cody, Robert J., Jr.
Coggins, Cecil H.
Cohan, Lawrence D.

Cohen, Alfred M.
Cohen, Carla B.
Cohen, George L.
Cohen, Lewis
Cohen, Mandel E.
Cohen, Raquel E.
Cohen, Richard B.
Cohen, Stanley A.
Cohen, Stanley R.
Cohn, Kenneth H.
Colan, Steven D.
Cole, Edwin M.
Coleman, Margaret
Coleman, Patricia
Coleman, William S.
Collin, Jean P.
Colvin, Robert B.
Concannon, Robert N.
Conlay, Lydia H.
Conner, Edison S.
Connolly, Thomas W.
Constable, John D.
Cook, I. Kathleen
Coonar, Hardey S.
Coons, Albert H.
Cooper, David S.
Cooper, Jeffrey B.
Cooper, Paul E.
Cope, Oliver
Copeland, Michelle
Cori, Carl F.
Correia, John A.
Cosimi, A. Benedict
Covino, Benjamin g.
Crane, Ruth J.
Crawford, John D.
Crawford, John L.
Crone, Robert K.
Crooks, Kiran K.
Cross, Shelley A.
Crowell, Robert M.
Crowley, William F.
Cullen, David J.
Culver, Perry J.
Curfman, Gregory D.
Curtiss, Paul H.
Custer, Joseph R.
Cynkin, Morris
Cywinski, Josef K.
Daggett, Willard M., Jr.
Dagi, Teodoro F.
Dalton, John C.
Daly, John S.F.
D'Ambra, Michael N.
Daniel, Thomas O.
Daniels, Gilbert H.
Darling, R. Clement
Das, Hasi R.
Dattwyler, Raymond J.
d'Autremont, Chester C.
David, John R.
Davila, Carlos N.
Davis, Barry L.
Davis, James M. III
Davis, Kenneth R.
Davis, Richard F.
Davison, J. Kenneth
Dawson, Steven L.
Day, Calvin L., Jr.
Day, Max
Dayer, Jean-Michael
DeBros, Frederic M.
Dec, George W., Jr.
DeCook, Timothy H.
Dedrick, Carolyn G.
Dedrick, Daniel F.
Delong, G. Robert
Demirjian, Zareh N.
Deramo, Edward M.
DeSanctis, Roman W.
Detsky, Allan S.
Deveau, Linda A.
Deykin, Daniel
Diamant, Morris A.
Dickerson, G. Richard
Dienstag, Jules L.
Dietz, Elizabeth
Dietz, William
DiFrancesco, Louis V.
DiMario, Richard
Dinarello, Charles
Dineen, James J.
Dinsmore, Robert E.
Dixon, Suzanne D.
Dodson, Thomas F.
Dohan, Francis C., Jr.
Donahoe, Patricia
Donaldson, Gordon A.
Donaldson, Magruder C.
Donelan, Matthias B.
Donlon, John V., Jr.
Donoff, R. Bruce
Donovan, Donald D.
Dooling, Elizabeth C.
Doppelt, Samuel H.
Doppke, Karen P.

Doroghazi, Robert M.
Dosoretz, Daniel E.
Dos Santos, Maria Julia L.
Doyle, Gerald J.
Dreskin, Jane E.
Dretler, Stephen P.
Drew, Michael A.
Dreyfuss, Jack R.
Drop, Lambertus J.
DuComb, Laurence E.
Dudani, Niranjankumar
Durant, Thomas S.
Durkot, Michael J.
Dutton, Robert E.
Dvorak, Ann M.
Dvorak, Harold F.
Dwyer, Thomas F.
Dye, Robert A.
Dyer, Edward C.
Earls, Felton J. III
Easter, Joyce A.
Ebert, Thomas A.
Echinard, Christian E.
Ehrlich, H. Paul
Ehrlich, Michael G.
Ehrlich, Paul H.
Eisenberg, Leon
Eisenthal, Sherman
Elcox, Kathleen M.
Ellis, Daniel S.
Ellis, Lawrence B.
Ellis, Ronald D.
Ellison, James M.
Ellman, Leonard L.
Elmaleh, David R.
Emerson, Clifton W.
Emerson, Roger H.
Engel, Peter A.
England, Albert C., Jr.
England, Michael R.
Epp, Edward R.
Epstein, Michael F.
Erbe, Richard W.
Erdmann, A. John III
Erlich, Paul H.
Erman, Milton K.
Etkin, Masha
Eyre, David R.
Fahmy, Nabil R.
Faix, James D.
Falk, William E.
Fallon, John T.
Fang, Leslie S.
Fawcett, Don W.
Feingold, Murray
Feld, James M.
Felenstein, Donna
Ferguson, Charles M.
Ferraro, Nalton F.
Ferris, Benjamin G.
Ferrucci, Joseph T.
Field, Mark G.
Fife, Daniel
Fifer, Michael A.
Finch, Ellen L.
Fine, Jo David
Finklestein, Seth
Finkelstein, Stan N.
Finn, Daniel J.
Fischer, Edwin G.
Fisher, C. Miller
Fishman, Mark C.
Fisk, Samuel H.
Fitzpatrick, Thomas B.
Fiumara, Nicholas J.
Fleming, T. Çorwin
Flynn, Daniel F.
Folkman, M. Judah
Foote, Warren E.
Forbes, Anne P.
Forwand, Stanley A.
Fosburg, Martin T.
Foster, Gerald S.
Fowler, Burt N.
Fowler, Dennis L.
Fox, Jonathan L.
Frame, Lawrence
Frankel, Freddy H.
Franklin, William
Franseen, Clifford C.
Fraser, Helen R.
Frazier, Howard S.
Frede, Thomas E.
Freedman, Harold J.
Freedman, Roger A.
Freis, Edmond S.
Fremont-Smith, Maurice
Friedberg, Carl E.
Friedlaender, Robert P.
Friedlich, Allan L.
Friedman, Joel
Friedman, Mark
Frist, William H.
Froelich, Jerry W.
Fromer, John L.
Fuleihan, Samir F.

Fuller, Thomas C.
Funkenstein, H. Harris
Gabel, Richard H.
Gadziala, Nancy A.
Galdabiel, James
Gallagher, Michael J.
Gallant, Thomas E.
Galli, Stephen J.
Gallico, G. Gregory III
Gallo, Reynoso S.
Gambill, John D.
Gammon, Maureen T.
Ganczewski, Ann C.
Gang, David L.
Ganz, Peter
Ganz, Robert N.
Garan, Hasan
Gardella, Joseph W.
Garg, Hari G.
Garland, Rebecca C.
Gaz, Randall D.
Geffin, Gillian A.
Gelenberg, Alan J.
Geller, Stuart C.
Gellis, Stephen E.
George, Anthony
Gergely, John
Gerhart, Tobin N.
Gerweck, Leo E.
Gibbons, Edward F.
Gibbs, Richard F.
Gibson, Robert C.
Gilchrest, Barbara A.
Gillette, Michael t.
Ginandes, Carol S.
Ginns, Leo C.
Gissen, Aaron J.
Gittes, Ruben F.
Giustra, Lawrence J.
Glimcher, Laurie H.
Glimcher, Melvin J.
Glotzer, Donald J.
Godine, John H.
Goitein, Michael
Gold, Abraham
Gold, Herman K.
Goldberg, Alan H.
Goldblatt, Allan
Golden, Isaac
Goldfinger, Stephen E.
Goldie, William D.
Goldman, Margo
Goldmann, Donald A.
Goldring, Steven R.
Goldstein, Mark A.
Gomery, Pablo
Gonzales, Jose R.
Gonzalez, Ernesto
Gonzalez, Luis R.
Goodgame, Richard W.
Goodman, Mark M.
Goodman, Max L.
Goodson, John D.
Gordon, A. Lee III
Gordon, Christopher D.
Gordon, Peter H.
Gordon, Robert D.
Goroll, Allan H.
Gorski, Peter A.
Gottlieb, Sheldon K.
Goudsouzian, Nishan G.
Gounaris, Anne D.
Grabias, Stanley L.
Grant, David C.
Gravlee, Glenn P.
Green, Allan M.
Green, Thomas H., Jr.
Greenberg, Donna B.
Greenblatt, David J.
Greene, Reginald E.
Greene, Warner C.
Greenes, Robert A.
Greenfield, Alan J.
Greenspan, Peter T.
Greenstein, Robert
Greenwald, Jeffrey
Greenwald, Michael A.
Gressitt, Steven E.
Grillo, Hermes C.
Griscom, N. Thorne
Grodin, Michael A.
Gross, Jerome
Gross, Peter L.
Grossman, Jerome H.
Grossman, Melvyn L.
Grossman, Richard S.
Grotta, James C.
Grover, John W.
Groves, James E.
Guggenheim, Frederick G.
Guilmette, Kathleen
Guiney, Timothy E.
Gunderson, Leonard L.
Gunst, Marcel A.
Guralnick, Walter C.
Guyton, Robert A.

Guyton, Steven W.
Haas, Gary S.
Habener, Joel F.
Haber, Edgar
Haber-Cohen, Andrea
Hackett, Thomas P.
Hagen, I. Kathleen
Haines, Linda J.
Hales, Charles A.
Hall, Deborah A.
Hall, James B.
Hallett, Joseph J.
Hallowell, Phillips
Halperin, John J.
Hamilton, Marilyn S.
Hammer, Scott M.
Hanna, Eleanor Z.
Hansen, Reid H.
Hanson, Eric C.T.
Harbin, William P.
Hardy, Charles A.
Harkness, Stephen H.
Harley, William D.
Harm, William III
Harmel, Richard P., Jr.
Harmon, David C.
Harpin, Raoul E.
Harris, Francis D.
Harris, H. Patterson, Jr.
Harris, Jeffrey F.
Harris, Leon S.
Harris, Nancy L.
Harris, Steven
Harris, William H.
Harrist, Terence J.
Harthorne, J. Warren
Hartzband, Pamela I.
Hastings, Hill
Haupert, Garner T.
Hauri, Hans Peter
Hauser, Mary F.
Hauser, Michael
Hauser, Stephen L.
Hayashi, Akira
Hayden, Jay G.
Haynes, Harley A.
Head, John M.
Heaney, John A.
Heath, Barry W.
Hedberg, Stephen E.
Hedley-Whyte, John
Heller, Daniel G.
Hendren, W. Hardy
Heney, Niall M.
Henneman, Elwood
Herr, Betty E.
Herrera, Lorenzo
Herrin, John T.
Herscovics, Anette A.
Herzog, David B.
Hessalink, John R.
Hester, Judith C.
Hickey, Paul R.
Hicks, Robert H., Jr.
Hier, Daniel B.
Higgins, Thomas F.
Highberger, John H.
Hiki, Yoshitane
Hill, William R., Jr.
Hinshaw, Waldo S.
Hirsch, Martin S.
Hnatowich, Donald J.
Ho, Paul K.
Hoagland, Peter M.
Hobbs, Eleanor T.
Hochberg, Fred H.
Hochberg, Mark S.
Hoerner, Thomas E.
Hoffer, Edward P.
Hoffman, Robert M.
Holder, Richmond
Holick, Michael F.
Holmes, Lewis B.
Holzman, Philip S.
Homcy, Charles
Honarbakhsh, Ab Bas
Honickman, Steven P.
Hood, Roger W.
Hoop, Bernard, Jr.
Hopkins, Cyrus C.
Hoskins, R. Bruce
Howe, Henry D.
Huang, Henry H.L.
Huber, Agnes M.
Hudson, Lynn D.S.
Hueter, David C.
Hugenberger, Paul W.
Huggins, Charles E.
Hulmes, David J.S.
Humphrey, Christopher S.
Humpreys, Storer P.
Hunt, Jettie V.
Hunter, Meredith M.
Hurrell, John G.
Hutter, Adolph M., Jr.
Hyslop, Newton E., Jr.

Idler, Richard S.
Ildstad, Suzanne T.
Ingersoll, Francis M.
Ingwall, Joanne S.
Inui, Kne-ichi
Irwin, David
Irwin, John W.
Isaacs, James P.
Iseke, Richard J.
Isler, Robert J.
Isselbacher, Kurt J.
Jacobs, Edward E.
Jacobs, John W.
Jacobs, Marshall L.
Jacobsen, Stephen J.
Jacobson, Bernard M.
Jacoby, George A., Jr.
Jacoby, Lee B.
Jaken, Susan
Jarrell, Joseph A.
Jasinka, Miroslawa T.
Jauernek, Reinhard R.
Jayasankar, Subramanyan
Jean-Baptiste, Michel
Jeanloz, Robert W.
Jeffrey, Charles C.
Jellinek, Michael S.
Jeon, Andrew A.
Jergesen, Harry E.
Jessop, Carol J.
Jett, Gary K.
Johnson, Eric H.
Johnson, G. Timothy
Johnson, Randall D.
Johnson, Robert A.
Johnston-Wint, Barbara P.
Johnston, William E.
Joiner, Jane H.
Jones, Barbara P.
Jones, Henry W. IV
Jones, Thomas H.
Jones, William N.
Joseph, Brian S.
Jovenich, James J.
Joyce, Michael J.
Juguilon, Augusto C.
Jung, Walter K.
Jupiter, Jesse B.
Justice, Norma S.
Kaban, Leonard B.
Kainz, Richard I.
Kaitz, Alan J.
Kalckar, Herman M.
Kameny, Stuart M.
Kaminski, Michael J.
Kanarek, David J.
Kane, Lewis W.
Kane, Robert A.
Kaplan, Joan C.
Kaplan, Richard F.
Karohmer, Adolf W.
Karian, Edward
Karlin, Lawrence I.
Karnovsky, Morris J.
Katlic, Mark R.
Katus, Hugo A.
Katz, Steven G.
Kaufman, Jeffrey L.
Kaufman, Sheldon D.
Kazemi, Homayoun
Keenan, M. Edward
Keenan, Thomas J.
Keim, Daniel E.
Keith, David A.
Kelleher, Thomas R.
Keller, John W.
Keller, Martin B.
Kelley, Rita M.
Kelly, Dorothy H.
Kelly, John P.W.
Kelmer, Barry J.
Keng, Peter C.P.
Kennedy, Sean K.
Kerr, Walter S., Jr.
Ketchum, William F.
Keutmann, Henry T
Khaw, Ban-An
Kiang, Nelson Y.S.
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Kim, Samuel H.
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Pierce, Donald S.
Pilch, Ben Z.
Pingree, Richard C.
Pinn, Vivian W.
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Pointer, Richard H.
Poletti, Charles E.

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Pong, Raymond S.
Pontoppidan, Henning
Poon, Leonard W.
Popp, John W.
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Portman, Steven M.
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Post, Diana E.
Potsaid, Majik S.
Potts, Frisso A.
Potts, John T.
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Powers, Eric
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Pratt, Richard E.
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Pressman, Roberta A.
Prien, Edwin L., Jr.
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Rubin, Robert H.
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Barton, Theodore C.
Bernstein, Jerrold G.
Boudreau, Francis H.
Burgin, Leo B.
Cline, Herbert S.
Davies, John A.V.
Doonan, James M.
Galler, Janina R.
Glick, Hyman
Goldberg, Peter E.
Goldthwait, Joel C.
Hall, Francis C.
Holland, Daniel J., Jr.

Johnson, Neil R.
Levy, Bernard S.
Macknin, Michael L.
Malcolm, John A.
Mushatt, Cecil
Nathan, Louis
Nobel, Kenneth W.
Noe, Joel M.
Palmer, R. Sterling
Parsons, Langdon
Platt, Orah S.
Potter, Maxwell G.
Rawdon, W. Kenner
Russfield, Agnes B.
Schatzki, Richard
Sidman, Richard L.
Silverman, Samuel
Smith, Barry H.
Talbot, Nathan B.
Thomas, Wilbur A.
Villee, Dorothy
Waitzkin, Evelyn D.
Wallace, Lynn
Webster, Richard C.
White, James C.
Wolff, Louis

Burlington

Norris, Ronald V.

Cambridge

Addante, Rocco R.
Balch, Franklin G., Jr.
Bandler, Bernard
Beierholm, Edward A.
Belsey, Richard E.
Boerstling, Herbert
Carter, Franklin
Carter, George H.
Catlin, Randolph
Cohen, Elliott L.
Cohen, Jonathan
Coles, Martin R.
Colton, Clark K.
Coolidge, John C.
Corkin, Suzanne H.
Daly, James S.F.
DeLuca, Salvatore
Deutsch, Helene
Dewey, C. Forbes
Draskoczy, Camille B.
Dreier, Theodore, Jr.
Eisenberg, Carola B.
Feinhandler, Sherwin J.
Feldman, Joel J.
Figman, Robert J.
Frank, Thomas
Friedman, Rochelle R.
Gates, Phillip H.
Geiger, Ronald H.
Gilbert, John E.
Glick, Thomas H.
Gordon, John E.
Greilsheimer, Howard M.
Growdon, John H.
Henderson, Mary
Hubbard, Eliot, Jr.
Johnson, Richard A.
Jones, H. Walter, Jr.
Kantrowitz, Paul A.
Koumans, Alfred J.R.
Kwan, Theodore H.
Langston, Charles S.
Lees, Robert S.
Leibel, Rudolph L.
Lerner, Norma B.
Liteplo, Merrill G.
Littlehale, Robert F.
Mack, John E.
Maier, Ward P.
Mann, Robert W.
McFarland, James C.
Moore, Gordon T.
Murray, Brian W.
Neu, Carlos A.
Paul, Igor I.
Pechet, Maurice M.
Petersen, Veronica S.
Pierce, Chester M.
Porell, William J.
Porter, Philip J.
Postel, Sholem
Rectanus, Daniel R.
Reid, Elizabeth A.
Rendall, Edward S.
Richie, Robert H., Jr.
Ross, Ralph A.
Settel, Kenneth M.
Shelton, William R.
Shershow, John C.
Shortsleeve, Michael J.
Smith, Thomas W.
Snyder, Benson R.
Stanbury, John B.
Stone, Alan A.
Sturgis, Somers H.
Thrasher, Elliot L.
Tingey, William H., Jr.

Umlas, Joel
Wallace, James W.
Weinberger, Jerome L.
Wohl, Martin J.
Wurtman, Richard J.
Wyman, Stanley M.
Yaffee, Howard S.

Charlestown

Allukian, Myron, Jr.
Beyer, Catherine H.
Cauley, Michael J.
DeMuth, Susan A.
Godley, Anne F.
Goldstein, Gary F.
Green, Warren F.
Havas, Stephen W.
Horvath, Ragnhild M.
Horwitz, Ralph I.
Jacobson, Alan M.
Laster, James M.
Leet, Robert K.
Lite, Scott W.
Lundy, Nancy A.
Murphy, Janice A.
O'Shea, Kathleen T.
Panowicz, Thomas B.
Rochman, Roy A.
Sweet, Roger H.
Wasserman, Linda
Waterfall, David E.
Winn, William A. III
Woods, Bryan T.

Chelmsford

Farnham, Jack E.
Parsons, Edward F.

Chelsea

Barkin, Joan W.
Benardi, Michael I.
Berman, Harry
Bierman, Frederick Z.
Billings, John A.
Dumont, Matthew P.
Bashir-Farahmand, Jaleh
Gianturco, Nicholas
Goldstein, Richard L.
Guthrie, Andrew D., Jr.
Hunsberger, Peter
Jacobson, Sheryl A.
Kelly, Jeanne M.N.
Kronenberg, Gretchen B.
Oliver, L. Christine
O'Malley, Terrence A.
Paretti, Joseph P.
Richards, Sarah J.
Seplowitz, Howard
Stearns, Charles M.
Whelan, Mary A.
Worley, Gordon

Chestnut Hill

Bierbaum, Benjamin
Brende, Robert
Dwight, Richard W.
Fine, Jacob
Hodgson, John S.
Houmans, John, Jr.
Iskandar, Adly H.
Lazar, Gerald K.
Simon, Harold
Spellman, John W.
Stetson, Richard P.
Thorndike, Augustus

Cohasset

Maltz, David L.
Rever, George W.
Sceery, Robert T.

Concord

Austin, Richard C.
Barrie, Joseph R.
Cantu, Robert C.
Hadley, Terry P.
Hallenback, Dorr F., Jr.
Huizenga, Charles G.
Keuper, Charles S.
Nelson, Michael H.
Norton, Paul L.
O'Malley, John E.
Pugilese, Michael M.
Rudnick, Jeffrey P.
Snyder, John C.
Souter, Lamar
Strickler, William L.
Toomey, Edward G.

Danvers

Chaharyn, Joanne (Hudson)
Essember, Lawrence J.
Fearer, Nathan H.
Jones, Wallace A.
Patton, Anthony S.
Steeves, Philip E.
Tejwani, Nehchal V.
Warfield, George R.
Zitin, Melinda K.

Dedham

Curwen, William L.
Osborne, Robert K.
Putnam, Henry M.

Deerfield
Lynch, Phillip I.
Dorchester
Howell, Mary C.
Mass, Lawrence D.
Ross, Jessica A.
Dover
Akins, Carlton M.
Clowes, George H.A., Jr.
Kinsey-Ruegg, Dera
Santoro, Benjamin T.
Duxbury
Clark, Richard J.
Fowler, Dwight M.
Gardner, George
Whiskin, Frederick E.
East Boston
Carl, Charles W., Jr.
Katz, Edward K.
Shackleton, Bruce W.
Shreier, Herbert A.
Edgartown
Mazer, Milton
Everett
Lavelle, William G.
Fall River
Courey, W. Robert
Hawes, Cornelius H.
Hill, Norman P.
Miller, Abbott R.
Tepper, Joel E.
Falmouth
Bixby, H. Irving
Christian, George
Heffron, Roderick
Palmer, Michael S.
Fitchburg
LeDonne, John E.
Pick, Walter
Walker, George M.
Framingham
Albert, Joseph
Carroll, Brian C.
Denton, Jane E.
Golden, Theodore S.
Helfant, Murray H.
Ingalls, Theodore H.
Kahn, Robert E.
Leeman, Cavin P.
Quindlen, Eugene A.
Senghas, Richard E.
Winzelberg, Gary G.
Gardner
McPeak, Clarence N.
Gloucester
Kline, Robert M.
Oder, Frederic E.
Rosenberg, Bruce M.
Great Barrington
Whitfield, Thomas J. III
Greenfield
Buchanan, William R., Jr.
Jarx, Robert H.
Groton
Pittman, Helen S.
Harvard
Padget, Charles H.
Harwichport
Wheeler, Charles
Hathorne
Conboy, Edward A.
Haverhill
Kwass, George F.
Lee, Sherwood B.
Malamud, Michael H.
Hingham
Lessing, Mark E.
Oppenheim, Arnold R.
Holyoke
Bandeian, Alice M.
Ferguson, Edward L.
Sigelman, David R.
Hyannis
Eldredge, James H.
Garran, Frank W., Jr.
Hazard, Gerald W.
Leland, Katherine A.
Mathewson, Herbert O.
O'Malley, Austin F.
Osmond, John D. III
Rymzo, Walter T.
Ipswich
Gauthier, Jacqueline
Petranek, Joseph R.
Wigglesworth, William C.
Jamaica Plain
Farhadi, Amir M.
Graham, John R.
Luongo, Michael A.
McCormack, William H.
Ramsey, Paul H.
Smith, Joseph A.
Solomon, Harry C.
Timberlake, William H.
Lawrence
O'Shea, James A.
Shoaps, Keith B.

Leominster
Feldman, Geraldine G.
Lexington
Bellinger, Martin J.
Chaglassian, John H.
Friedman, Leonard J.
Joseph, Alfred T.
Kahan, Eileen B.
Moore, Michael J.
Morrall, John F.
Petersen, James A.
Schatzki, Stefan C.
Sites, Vincent R.
Lincoln
Keevil, Charles S., Jr.
Kubik, Charles S.
Lincoln Center
Hardy, Harriet L.
Longmeadow
Hopkins, Frederick S.
Lewis, James
Plotkin, Leonard H.
Rich, James G.
Tractenberg, Howard A.
Waxman, Herbert S.
Lowell
Grant, George J.M.
Letsou, Vasilios G.
Merino-de Villasante, Jorge M.
Reynolds, Stephen L.
Lynn
Attia, Rafik Rizk
Cooperman, Sheldon
Milligan, Janice E.
Perlman, Donald M.
Sarris, S. Peter
Sloane, Robert E.
Lynnfield
Brownstein, Carlton
Pawlowski, Margaret M.
Simons, Laurence H.
Manchester
Huntington, Benjamin L.
Marblehead
d'Elseaux, Frank C.
Halstead, Douglas O.
Hopkins, Stanford W.
Kimball, Peter G.
Record, Eugene
Marlborough
Hurston, Ronald O.
Matapoisett
Empson, Dora R.
Medford
Aprille, June R.
Bennett, Doris R.
Levine, Melvyn B.
Rubin, Vincente
Melrose
Glines, George A.
Goldman, Maury A.
Hormell, Robert S.
McCormack, Geraldine A.
Welch, John B.
Milton
DeLorme, Thomas L.
DeMarco, Anthony M.
Driscoll, Robert A.
Gregg, Ward I.
McGrath, Edward F.
Robinson, John C.
Sullivan, Eugene R.
Toch, Rudolf
Van Dyke, Wilhelmina
Natick
Hanelin, Joseph
Myers, Gordon S.
Needham
Ostheimer, Gerald W.
Seinsheimer, Frank III
New Bedford
Gracia, Robert M.
Lewis, Emory O.
Simmons, Alvin J.
Tripp, Curtis C.
Velho, Lawrence F.
Newburyport
Ferrell, Robert W., Jr.
Hochstedler, Rowen M.
Slotnick, Bennett S.
Newton
Brant, Rene s.
Caplan, Charles
Cope, Stuart
Diamond, David B.
May, George A., Jr.
Neely, Constance F.
Shields, Lawrence T.
Speare, George S.
Newton Centre
Bonner, Francis J.
Carter, Lucille P.
Gill, Benjamin F.
Kennard, Harrison E.
Robinson, Edmond D.
Rutherford, Rondall W.

Siorta, Ronald L.
Smith, Judson A.
Valle, Alice W.

Newton Lower Falls
Brownsberger, Carl N.
Cohen, John M.
Drapkin, Mark S.
King, Howard S.
McGinty, John B.
Page, Lot B.
Steinberg, Robert S.

Newtonville
Hermann, Howard T.
Leber, Martin E.

Norfolk
Yatsuhashi, Masao

North Adams
Becker, Daniel I.

Northampton
Averill, James H.
Rice, Richard C.
Tatlock, Hugh

North Andover
Rogers, Horatio
Wallwork, David W.

Norwell
Kearsley, Richard B.
Mayo, Richard A.

Oak Bluffs
Claydon, Charles T.
Eliot, Gail R.
Goldfein, Michael L.

Peabody
Geffin, Bennie
Hayes, Hamilton R.
Lawson, Dexter W.

Petersham
Carmody, John T.B.

Pittsfield
Tracy, Robert J.

Plymouth
Hurxthal, Lewis M.
Rushforth, David L.

Quincy
Caruso, Michael G.
Ciano, Joseph F.
Gallagher, William F., Jr.
McCarthy, Philip L.
McGugan, A. David

Randolph
Moore, Robert F.

Revere
Curren, Franklin C.
Van Arsdell, William R.

Rockport
Heath, Clark W.

Roslindale
Linenthal, Arthur J.

Salem
Brennan, Charles G.
Conway, Richard E.
Cooper, Herbert L.
Lydiard, Robert B.
Mignone, Robert J.
Moran, Deborah M.
Morse, Frank P.
Richards, Robert S.
Shannon, James M.
Sweetland, Ralph C.
Taggart, F. Howard, Jr.
Thompson, Richard H.
Zitin, Barry R.

Scituate
Joseph, John B.
Pozatek, Zigmunt W.

Somerville
Osler, David C.
Pollard, John T., Jr.

South Dartmouth
Winsor, Allen P.

South Duxbury
Shirley, J. Newton

South Orleans
Hill, Leonard W.

South Sudbury
Adelson, Willilam J.

South Weymouth
Emerson, George F.
Kilfoyle, Richard M.
Rounds, Charles E.
Silverstein, Peter R.
Wechsler, James S.

South Yarmouth
Anderson, Elroy E.
Garrett, John W.D.

Springfield
Franseen, Elmer F.
Williams, David W.

Stockbridge
Schwartz, Daniel P.

Stoneham
Rolle-Daya, Heike

Stoughton
Bercovitch, Lionel G.
Field, Richard A.
Sullivan, William H.

Sudbury
Johnson, F. George
Robinson, Michael J.
Swampscott
Mayo, Frederick B.
Slater, Eliot M.
Taunton
Murphy, John D.
Teaticket
Taylor, John B.
Topsfield
Fienberg, Robert
Vineyard Haven
Butler, Allan M.
Waban
Cares, Herbert L.
Garrey, Walter E.
Green, Sidney
Moncure, Ashby C.
Olin, Harry S.
Schwartz, Joseph E.
Wakefield
Cohen, Saul H.
Fiascone, Arnold D.
Rosenthal, Murray K.
Waltham
Agranat, Barry J.
Anderson, Donald F.
Barber, Doris E.
Daly, James J.
Edelstein, Leon M.
Haessler, Herbert A.
Hardy, Irad B.
Jungalwala, Firoze B.
Kolodny, Edwin H.
Kumar, Anil
Lewis, Joseph L.
Mackay, Harry A.
McCluer, Robert H.
Milunsky, Aubrey
Ouellette, Eileen M.
Rosenman, Julian G.
Sidman, Murray
Spence, Richard J.
Stoddard, Lawrence T.
Stoffyn, Anne Marie
Stoffyn, Pierre J.
Touchette, Paul E.
Valle, Calixto C.
Williams, Roger S.
Zola, Irving K.
Wareham
Lincoln, James R.
Watertown
Feinhandler, Sherwin J.
Wellesley
Aufranc, Otto
Cavanaugh, James J.A.
Cserr, Robert
Flanagan, Norris B.
O'Sullivan, Renee B.
Phillips, Edgar B. II
Stewart, Thomas D.
Stifler, Richard B.
Wellesley Hills
Bell, George O.
Evans, Robert E.
Pfeffer, William, Jr.
Prather, George C.
Reidy, John A.
Renna, Francis S.
Siner, Myron
Stempien, J. Henry
Zeller, John W.
Wellfleet
Dickson, William A.
Wenham
Todd, Barnard P.
West Concord
First, Robert A.
Ruboy, Jordan S.
Saef, Edward C.
West Dennis
Derrick, Charles C.
West Newton
Linton, Robert R.
Kelley, Sylvester B.
Martin, Albert R.
Van Buskirk, David
Willer, Lee H.
Westboro
Abraham, Henry D.
Weston
Choras, Peter T.
Clark, John G., Jr.
Gauld, A. Gordon
Harper, Gordon P.
Papas, Arthur N.
Park, Kyung M.
Sullivan, Francis J.
Vaughan, M. Clay
Wilkins, George F.
Wood, Lawrence C.
West Roxbury
Aaron, Roy K.
Sasahara, Arthur A.

Westwood
Jacobson, Gary
Williamstown
Reynolds, George S.
Winchester
Annino, Donald J.
Fahey, Stephen R.
Griesamer, Robert D.
Gross, Brian H.
Kaufman, Gustav G.
Kenzora, John E.
Kermond, William L.
Love, Harry M.P.
McLean, John D.
Winthrop
Jayasankar, Subramanyan
Woburn
Murphy, Michael D.
Woods Hole
Acheson, George H.
Corning, Howard G.
Egloff, Frank R.L.
Worcester
Benedict, Karl T., Jr.
Carmody, John T.B.
Cheeseman, Sarah H.
Cutler, Bruce S.J.
Damiani, C. Robert
DeGirolami, Umberto
Duggan, John A.
Gibson, James M.
Harper, Robert S.
Herrmann, John B.
James, Lewis P., Jr.
Janower, Murray L.
Johnson, Verner S.
Kadish, Sidney P.
Keller, Robert B.
Morris, Madeline B.
Starobin, Oscar E.
Stone, Bernard B.
VanderSalm, Thomas J.
Waud, Barbara E.
Weiner, Milton A.
Wheeler, Bancroft C.
Yankauer, Alfred
Zmylowski, Walter P.

MICHIGAN

Ann Arbor
Behrendt, Douglas M.
Bishop, Ronald C.
Brode, Marvin M.
Dworin, Aaron M.
Minter, Richard C.
Quarton, Gardner C.
Sweet, Robert B.
Waldron, Alexander M.
Wesley, John R.
Birmingham
Arnstein, A. Robert
Leach, Charles A., Jr.
Russell, Henry N., Jr.
Detroit
DelGuidice, Peter A.
Eyler, William R.
Frame, Boy
Mitchell, David c.
Morris, Roger H.
Prus, Alphonse M.
Smith, W. Pierce
Stiefel, Daniel M.
Sweeny, Donald N., Jr.
Grand Rapids
Beeman, Carl B.
Grosse Pointe
Blodgett, William H.
Krickstein, Herbert I.
Seebacher, Jurgen
Sphire, Raymond D.
Zukowski, Henry J.
Ionia
Tannenheimer, John F.
Iron Mountain
Alexander, William H.
Jackson
Munro, Nathan D.
Orchard Lake
Larson, Ronald R.
Plainwell
Traul, Richard S.
Traverse City
Esslinger, John O.
Ypsilanti
Smillie, John W.

MINNESOTA

Golden Valley
Popkin, Michael K.
Isle
Harvey, Joan
Minneapolis
Allen, David W.
Croll, Diane
Florence, David W.
Fraley, Edwin E.

Goetz, Frederick C.
Johnson, Norman P.
Kennedy, B., Jr.
Markland, A. Colin
McKhann, Charles F.
Okagaki, Takashi
Peterson, Harold O.
Pohl, John F.
Rodgers, Richard S.
Wang, Yang

Minnetonka

Gayes, James M.

Rochester

Haines, Samuel F.
Helmholtz, Henry F., Jr.
Karnes, William E.
Randall, Raymond V.
Weinshilboum, Richard M.

St. Paul

Ramirez-Lassepas, Manuel

MISSISSIPPI

Holly Springs

Young, Thomas K.

Jackson

Davis, Fred G.
Glass, D. David
Guyton, Arthur C.
Irwin, Robert J., Jr.
Tonnesen, Alan S.
Weems, William L.

MISSOURI

Chesterfield

Stephens, William A.

Clayton

Volpe, Joseph J.

Creve Coeur

Hammerman, Marc R.

Fort Leonard Wood

Pierce, R. Wendell

St. Joseph

McDaniel, John R.

St. Louis

Alpers, David H.
Chaplin, Hugh, Jr.
Eisenstadt, Michael
Funsch, Robert E.
Gelb, Lawrence D.
Hahn, Michael J.
Hanaway, Joseph
Hanser, Theodore H.
Hershey, Falls B.
Kotner, Lawrence M.
Majerus, Philip W.
Mendelsohn, George E.
Miller, Jule P., Jr.
O'Brien, Robert M.
Owens, William D.
Prensky, Arthur L.
Robbins, Eli
Shuter, Eli R.
Strauss, Arthur E.
Thach, W. Thomas, Jr.

Webster Groves

Doisy, Edward A., Jr.

NEBRASKA

Omaha

Luikart, Ralph H.

NEVADA

Las Vegas

O'Rourke, Dermot A.

Reno

Fischer, John R.

NEW HAMPSHIRE

Alton Bay

Miller, Carroll C.

Concord

Heston, Julie L.
Mintz, E. Ross
Riggs, Lamar W.

Dover

Adams, Patricia A.
Wilson, Robert F.

Dublin

Meath, James A.

Exeter

Curtin, Richard R.
Heyl, James T.
Mixter, Charles G., III
Pease, Francis B.

Freedom

Pippitt, Richard B.

Greenfield

Bell, John F.

Hanover

Fox, Sherman S.
Friedman, Matthew Joel
Gundersen, Sven M.
Harris, Edward D., Jr.
Heyl, Henry L.
Lipowski, Zbigniew J.
Rolett, Ellis L.

Jaffrey Center
Millard, D. Glynn
Keene
Ash, Homer L.
Laconia
Baker, William J.
Lancaster
Strayer, Luther M., Jr.
Manchester
Walker, Jerome K.
Meredith
Emerson, George F.
Nashua
Berrien, Frederick B.
Peterborough
Watkins, Arthur L.
Plymouth
Townsend, James H.
Temple
Rock, John

NEW JERSEY
Camden
Zinninger, George E.
Elizabeth
Gorman, Rosemary V.
Fort Dix
Jones, Frederick L.
Fort Lee
Brauner, Gary L.
Glen Ridge
D'Alessandro, Genesio L.
Hillsdale
Apter, Roy J.
Long Branch
Lopano, Angelo J.
Madison
Diehl, Sylvia D.
Milburn
Leeds, Harold C.
Monclair
Greene, Robert G.
Morristown
Guss, Stephen B.
Newark
Abel, Ronald M.
Schaaf, Royal S.
New Brunswick
Kuhn, William G., Jr.
Paterson
Van Eerde, Albert
Princeton
Dalrymple, Willard
Rothberg, Harvey D., Jr.
Princeton Junction
Pierson, Joseph D., Jr.
Rahway
Vagelos, P. Roy, Sr.
Short Hills
Dembner, Allan G.
Willetts, Arthur T.
Shrewsbury
Judd, Alvan B.
Springfield
Wosnitzer, Morey
Tinton Fallјs
Smith, Richard H.
Trenton
Rosenthal, Albert L.
Voorhees
Schantz, Arthur S.

NEW MEXICO
Albuquerque
Adler, Scott
Gold, Gerald N.
Kinney, Robert J.
Means, Paul H.
Parnell, Edward
Williams, Ralph C., Jr.
Los Alamos
Grier, Robert S.
Zuni
Steinbock, R. Ted

NEW YORK
APO
Campbell, Carlos C.
Zaidan, James R.
Albany
Holt, William L., Jr.
Lozada, Rommel G.
Thomas, Wilbur A.
Batavia
McCune, William S.
Bedford
Patterson, Russell H.
Bronx
Abramowicz, Mark
Baddock, Sheldon S.
Fisher, Michael
Foldes, Francis F.
Greenhill, Maurice H.
Trieger, Norman
Ulick, Stanley
Brooklyn
Friedman, Clarence F.
Sauire, Lucy F.

Buffalo
- Bakay, Louis
- Barlow, Joseph J.
- Calkins, Evan
- Cuntupalli, R.M.D.V. Prased
- Klein, David M.
- O'Connor, Thomas A.

Cold Springs, Harbor, Long Island
- Walker, Peter F.

Cooperstown
- Klenk, Eugene L.
- Mackie, Robert W.
- McIver, Monroe A.
- Sahler, Otto DeP.

Delmar
- Berg, Howard W.

Eden
- Hummel, L. Edgar

Geneva
- Platzer, William R.

Glen Falls
- Batt, Richard C.

Honeoye Falls
- Thorpe, William P.

Kenmore
- Schenk, Worthington G., Jr.

Kingston
- Gorman, Mary L. Gannon

Larchmont
- Haralambie, James Q.

Little Neck, Long Island
- Wenig, Martin
- Manchester
- Bienvenu, Lester J.

Manchester
- Bienvenu, Lester J.

Manhasset, Long Island
- Coffey, Edward L., Jr.
- Nicosia, Arnold P.

Mechanicville
- Ryan, James P.

New Hartford
- Millet, J. Bradford

New York City
- Ackerman, A. Bernard
- Bowden, Lemuel
- Carroll, Robert E.
- Chen, Lincoln C.
- Cohn, Zanvil A.
- Dole, Vincent P., Jr.
- Eaton, Richard G.
- Edelman, Gerald M.
- Edelson, Richard L.
- Edmondson, Richard H.
- Finkenstaedt, John T.
- Franklin, John E., Jr.
- Fuller, Arlan F., Jr.
- Goldblatt, Myron E.
- Hensle, Terry W.
- Hofer, Myron A. II
- Kiely, Brian
- Leslie, Bruce
- Loeb, John N.
- Loeb, Robert F.
- Los, Edward J.
- Luck, David J.L.
- Maier, John
- McGovern, Thomas P.
- Metcalf, Kenneth M.
- Moore, Burness E.
- Nathan, Carl F.
- Oster, Martin W.
- Packert, Richard C.
- Peterson, Hart deC.
- Plank, Charles R.
- Raaf, John H.
- Rovit, Richard L.
- Silverstein, Samuel C.
- Steinman, Ralph M.
- Stenger, Richard J.
- Thomas, Stephen J.
- Twombly, Gray H.
- Watson, James W.
- William, Christine L.
- Wilson, Philip D.
- Wolff, Robert R.

Nyack
- Schnur, James

Pittsford
- Hainen, Ronald L.

Poughkeepsie
- Bedell, Wallace C.

Rochester
- Allison, Charles R.
- Berg, Robert L.
- Bohrer, Stanley P.
- Burton, Richard I.
- Chamberlin, Robert W., Jr.
- Gillies, Alastair J.
- Griner, Paul F.
- Jones, Robert H.
- Moss, Arthur J.
- Nelson, Curtis N.
- Rosenthal, Susan N.
- Schaffer, Derace L.

St. Albans
Johnson, Houston, Jr.
Scarsdale
Holland, Jimmie C.B.
Lipman, Marvin M.
Seed, John C.
Schenectady
Judd, James M.
Suffern
Bobroff, Lewis M.
Syracuse
Bornstein, Donald L.
Boyd, Peter R.
Collins, George H.
Gardner, Lytt I.
Hale, Clayton H.
Troy
Hann, Lucy E.
Upton
Dahl, Lewis K.
Utica
Case, Clarke T.
Knapp, Robert G., Jr.
Valhalla
Williams, Gary M.
Vestal
Pollack, James A.
Watertown
George, H. Louis, Jr.
Webster
Ricks, John E.
Westbury
Villar, Luis F.
White Plains
Newman, Herbert A.
Williamsville
Klein, Edmund
Woodbury
Charash, Leon J.

NORTH CAROLINA
Asheville
Morrison, Roger W.
Salisbury, Kent W.
Bahama
Pearse, Richard L.
Chapel Hill
Barnett, Thomas B.
Chamberlain, Harrie R.
Craige, Ernest
Gabriel, Don A.
Gottshalk, Carl W.
Hadler, Nortin M.
Haslam, Kenneth R.
Lassiter, William E.
Miller, Milton L.
Monroe, John T., Jr.
Noble, John J., Jr.
Parker, John C.
Preston, Edwin T.
Sparling, P. Frederick
Charlotte
Black, Edward B.
Brenizer, Addison G., Jr.
Elliot, Joseph A., Jr.
Zuger, James H.
Columbus
Placak, Joseph C., Jr.
Concord
Collins, David L., Jr.
Durham
Gibbons, Raymond J.
Griffith, John F.
Katz, Samuel L.
Lang, David J.
Lefkowitz, Robert J.
Peete, William P.J.
Reeves, Robert J.
Smith, Bruce M.
Williams, Robert Sanders
Wyngaarden, James B.
Fayetteville
Amick, Arthur F.
Greensboro
Register, John F.
Spencer, Richard E.
Troxler, Eulyss R.
Hayesville
Talmadge, Sam M.
Raleigh
Cannon, Helen C.
Cannon, Woodward
Gada, Preston H.
Manly, Isaac V.
Myers, Richard S.
Rhodes, John S.
Wooten, E. Jane H.
Worth, Thomas C.
Young, David A.
Southern Pines
Arrowood, Julia G.
McMillan, Robert M.
Winston-Salem
Conrad, Elizabeth

OHIO

Akron
- Skoblar, Richard S.
- Voke, Edward L.

Canton
- Scott, Murray W., Jr.

Cincinnati
- Block, Gordon L.
- Fischer, Josef E.
- Gall, Edward A.
- Glueck, Charles J.
- Kleinman, Leonard I.
- Newstedt, J. Roger
- Richardson, William R.
- Rubinstein, Jack H.
- Schneider, Benjamin
- Stern, Peter J.
- Tew, John McL.

Cleveland
- Badel, Daniel W.
- Banker, Betty Q.
- Brodkey, Jerald S.
- Cosgrove, Delos M.
- DiMarco, John P.
- Evans, Richard R.
- Ford, Amasa B.
- Glover, Donald M.
- Groves, Laurence K.
- Kendrick, James I.
- Lederman, Richard J.
- Lytle, Bruce W.
- Pearson, Olaf H.
- Pohl, Marc A.
- Selinger, Samuel L.
- Thurer, Robert L.
- Weir, David R.

Columbus
- Ellis, Effie O.
- George, Jack M.
- Haynes, Ruth C.
- Haynes, Walter M.
- Heggie, John F.
- Smead, William L.
- Vasquez-Amory, Ernesto

Dayton
- Kimure, Kazuo K.

Mansfield
- Jennings, Michael

Moreland Hills
- Baumgartner, Donavin A., Jr.

North Canton
- Shipley, Margaret S.

Oberlin
- Warner, John H., Jr.

OKLAHOMA

Ardmore
- Schuler, James D.

Duncan
- Morton, Robert O.

Muskogee
- Fite, E. Halsell

Oklahoma City
- Bell, James P.
- Carter, George Ben
- Halverstadt, Donald B.
- McClellan, Betty J.
- Stout, Hugh A.

Tulsa
- Steele, Byron W., Jr.
- Traver, Ralph F.

OREGON

Corvallis
- Steele, Robert E., Jr.

Eugene
- Singer, Kenneth M.

Medford
- Barss, Theodore P.
- Durno, Edwin R.
- Rutter, Thomas

Portland
- Baker, Russell L.
- Boyden, Allen M.
- Garrison, Penelope K.
- Lawrence, G. Hugh
- Novy, Miles J.
- Ray, Leon F.
- Sutherland, Donald W.

PENNSYLVANIA

Ardmore
- Sampson, D. Allen

Bangor
- Cascario, Nicholas, Jr.

Bethlehem
- Leister, C. Merrill

Bryn Mawr
- Ferguson, James J., Jr.
- Stewart, William G., Jr.

Camp Hill
- Gallia, Francis J.

Chester
- Sewall, Warren

Danville
- Heath, Robert D.

Stroudsburg
- Michie, Alexander J.

Erie
Fagenholz, Linda
Fagenholz, S. Allen
Gladwyne
Montgomery, Hugh
Grove City
Limkakeng, Alexander D.
Gwynedd
Stoddard, James K.
Harrisburg
Berkheimer, George A.
Hershey
Aber, Robert C.
Babb, Joseph D.
Harrison, Timothy S.
Lookingbill, Donald P.
Vesell, Elliot S.
Kenneth Square
Joplin, Robert
Lansdale
Kent, Peter D.
Latrobe
Moran, Thomas W., Jr.
Merion
Richter, Howard A.
Merion Station
Murphy, Grace L.
Satten, Neal R.
Mt. Lebanon
Barron, Kenneth G.
Overbrook Hills
Ginsberg, Myron D.
Palmyra
Lehman, Ralph A.W.
Paoli
Willens, John S.
Philadelphia
Abrahm, Janet L.
Arenson, Ronald L.
Asbury, Arthur K.
Borden, Spencer IV
Brent, Robert L.
Broennie, A. Michael, Jr.
Carter, James R., Jr.
Dunkman, W. Bruce
Gabuzda, Thomas G.
Godleski, John J.
Lau, Yuk-Kai
Leighton, Joseph
Littman, Phillip
Loomis, James C.
Mancall, Elliott L.
Mundth, Eldred D.
Murray, Thomas G.
Nicholson, Jesse T.
Peterson, Robert Ole
Pietra, Giuseppe G.
Roth, James L.A.
Schmidek, Henry H.H.
Schnabel, Truman G., Jr.
Spann, James F., Jr.
Starr, Isaac
Stunkard, Albert
Vaughan, Victor C. III
Wood, Howard P.
Pittsburgh
Bauer, Frank L.
Broudy, Arnold S.
Cheng, Vincent S.
Dwyer, John H.
Ferguson, Albert B., Jr.
Field, James B.
Green, William T., Jr.
Hakala, Thomas R.
Heros, Roberto C.
McLaughlin, William B.
Oh, Kook Sang
Price, Stuart E., Jr.
Savodnik, Irwin
Tyson, Robert G.
Urquhart, John III
Rosemont
Ming, Si-Chun
Selinsgrove
Bailey, Nelson E.
Springfield
Weinberg, Richard A.
Stroudsberg
Michie, Catherine R.
Wallingford
Kitts, Albert W.
Wayne
Beck, Laurence H.
Wyomissing
Morrissey, E. James
Morrissey, Eugene J.

RHODE ISLAND
Adamsville
Mason, William
Barrington
Spencer, Jack
Bristol
Scott, H. Denman
Cumberland
Hairabet, John K.

East Greenwich
Alper, Joseph C.
Pawtucket
Deutsch, Stephen D.
Providence
Flaxman, B. Allen
Hamlin, Hannibal
Hopkins, Robert W.
Land, Richard E.
McEnany, M. Terry
Pitts, John D.
Rosen, Richard A.
Sargent, Francis B.
Sawyer, Carl S.
Simeone, Fiorindo A.
Sinclair, Edmond B.
Strom, John O.
Zacks, Sumner I.
Rumford
Hogan, John F.
Warwick
Madden, Edwin J.

SOUTH CAROLINA
Beaufort
Maffeo, Alphonse A.
Charleston
Summerall, Charles P. III
Talbert, O. Rhett
Columbia
Theus, Walter W.
Florence
Hyman, Vera C.
Greenville
Minette, Lawrence J.

SOUTH DAKOTA
Sioux Falls
Barlow, John F.
Wegner, Karl H.

TENNESSEE
Chattanooga
Spalding, Robert
Franklin
Youmans, John B.
Johnson City
Brindley, Clyde O.
Kingsport
Maloy, Joseph K.
Memphis
Nobles, Eugene R., Jr.
Shaw, John L.
Stern, Newton S.
Nashville
Brown, Charles E.
Buchanan, Robert N., Jr.
Cobb, Cully A., Jr.
Duncan, Gary W.
Hall, H. David
Heller, Richard M.
James, A. Everette, Jr.
Kadir, Saadon
Kirshner, Howard S.
Page, David Ll
Patterson, A. Knox
Schwartz, Jonathan M.
Smith, Marion L.
Smith, Ralphael F.
Stone, Jeffrey D.
Oak Ridge
Ruley, Henry B.

TEXAS
Austin
Kreisle, James E.
Winkler, John J.
Beaumont
Hinshaw, Arvil J.
Corpus Christi
Jenkins, Charles K.
Dallas
Bilheimer, David W.
Binion, John T.
Brown, Michael S.
Coggeshall, Howard C.
Goldstein, Joseph L.
Helgeson, Norman G.P.
Hinton, Richard C.
Jenkins, M.T. Pepper
Martin, Charles L.
Martin, James A.
McCann, Samuel M.
Mills, Lawrence J.
Moore, S. Halcuit, Jr.
Platt, Melvin R.
Rose, Patrick F.
Schneiderman, R. Neal
Smitherman, Thomas C.
Spence, Harry M.
Stewart, Rege S.
Stewart, R. Malcolm
Thompson, Jesse E.
Urschel, Harold C., Jr.
Wheeler, Clarence G.
Willerson, James t.
Williams, J. Richard, Jr.
Williams, Oscar B., Jr.

Denison
Freeman, Don W.
El Paso
Samuels, David A.
Fort Worth
Key, Robert E.
Rutledge, Robb H.
Sloane, Robert W., Jr.
Houston
Butler, William T.
Crawford, Ernest S.
David, Soloman D.
Eppright, Richard H.
Feigin, Ralph D.
Floyd, William N.
Gerber, Bernard M.
Gotto, Antonio, Jr.
Guiberteau, Milton J.
Jarret, Michael T.
Kahan, Barry D.
Keats, Arthur S.
Mallette, Lawrence E.
Osborne, Barbara M.
Owen, William R.
Smith, Edward T.
Tombs, Barry D.
Wilde, Henry D., Jr.
Wolf, Laurence E.
Zisook, Sidney
Lackland Air Force Base
Brand, Jeffrey B.
Lubbock
Varman, Surendra K.
McAllen
Evans, Sheridan S.
San Antonio
Foley, F. Daniel
Seals, John R.
Thompson, Milton S., Jr.
Wichita Falls
Geller, Richard J.

UTAH
Ogden
Keyes, Gale H.
Perkins, Arthur
Salt Lake City
Burton, David A.
Elman, Arthur J.
Hammond, M. Elizabeth H.
Heyes, Edward A.
Johnson, Dale G.
Magarian, Howard S.
Middleton, Anthoy W., Jr.
Nelson, Russell M.
Nielsen, Talmadge W.
Temple, Anthony R.
Young, Clark

VERMONT
Banard
Emans, John B. II
Barre
Buttles, Roy V.
Molind, Samuel E.
Bennington
Baker, Dudley M.
Giddings, W. Philip
Greenleaf, David T.
Brattleboro
Glick, John L.
Burlington
Donaghy, Raymond M.P.
Kuhlmann, Raymond F.
Leadbetter, Guy W., Jr.
Marzuzan, John E., Jr.
Soyke, Lester F.
Tisdale, William A.
Monnisville
Sun, Edward R.
St. Johnsbury
Morrison, Harvey R.
Shelburne
Bowen, Charles R.
Lowell, William H., Jr.
Molloy, Maureen K.
Soule, A. Bradley, Jr.
Townsend
Decker, Briant L.
West Townshen
Folson, Hugh F.
White River Junction
Crandell, Walter B.
Learmonth, Suzzane J.
Staples, O. Sherwin

VIRGINIA
Alexandria
Collins, Richard
Charlottesville
O'Brien, William M.
Swineford, Oscar, Jr.
Watson, Robert F.
Wood, J. Edwin, Jr.
Falls Church
Ormandy, Lazlo
Fort Eustis
Fogelson, Frederick S.

McLean
Bridge, Edward M.
Pyenson, Leslie
Portsmouth
Weiss, Mark A.
Richmond
Blades, James F.
James, G. Watson III
Jones, Basil B.
Sutphin, Adney K.
Thompson, W. Taliaferro, Jr.
Tucker, James T.
Ulmer, Jack L.
Wright, R. Lewis
Roanoke
DeVerter, John S.
Glendy, R. Earle
Wood, Benjamin S.
Vienna
Lotz, Myron
Virginia Beach
Jeroy, Harry K.
Krop, Thomas M.
Nuzzo, Roy M.
Williamsburg
Jones, Thomas

WASHINGTON

Aberdeen
Cihak, Robert J.
Bellevue
Milam, Daniel F., Jr.
Bellingham
Watts, Arthur B.
Longview
Sandstrom, Robert E.
Mercer Island
Skinner, Alfred L., Jr.
Olympia
Jones, Gordon E.
Seattle
Bigby, Michael E.
Bogosian, Arment J.
Brown, Norman K.
Dale, David C.
Greene, Martin L.
Kleinman, Arthur M.
Kuo, Paul C.
Lovett, Michael A.
Mannik, Mart
McCollum, Richard G.
Odland, George F.
Patterson, Robert N.
Rutherford, Robert N.
Ryan, John A., Jr.
Shurtleff, David B.
Smith, J. Walter
Volwiler, Wade
Spokane
Brunes, Carl F.
Johnston, Edward V.
Kleaveland, Richard N.
Tacoma
Eliel, Leonard P.
Walla Walla
Brooks, Peter T.
Gilbert, Allen C.
Yacima
Mathieu, Thomas J.

WEST VIRGINIA

Beckley
Klingensmith, Walter E.
Charleston
Anderson, Randolph L.
Hills, Henry M., Jr.j
Revercomb, Paul H.
Morgantown
Morgan, Winfield S.
Shaffer, Hubert A.
Zavisca, Frank G.

WISCONSIN

Elm Grove
Schmidt, Robert A.
La Crosse
Gundersen, Adolf L.
Gundersen, A. Erik
Gundersen, Sigurd B., Jr.
Gundersen, Thorolf E.
Hayden, John W.
Rodman, Charles A. II
Tompkins, Douglas G.
Madison
Albright, Edwin C.
Barsch, John H.
Gordon, Edgar S.
Hopkins, Charles E.
Jarrett, Frederic
Javid, Manucher
Johnson, Sylvia
Maki, Dennis G.
McClung, John L.
Osborn, June E.
Marshfield
Pederson, Donald P.

Milwaukee
  Barrow, David W.
  Blodgett, Frederick M.
  Conley, James E.
  Cronkhite, Leonard W., Jr.
  Holbrook, Arthur A.
  Litwin, S. Betrand
Princeton
  Mueller, Gustave C.E.

ARGENTINA
Buenos Aires
  Bordone, Lilia E.

AUSTRALIA
Bedford Park
  Roberts, Andrew B.
Camperdown
  Atkinson, Kenneth H.
  Lane-Brown, Malcolm M.
Highgate
  Morley, Helen R.
Medicine
  McCoy, William T.
Melbourne
  Colquhoun, John B.
Parkville
  Niall, Hugh D.
Sydney
  Slater, Barbara L.
Victoria
  Fell, Gary
  Helme, Robert D.

BRAZIL
Rio de Janeiro
  Albuquerque, Paulo F.
  Mattoso, Luiz F. deQ.
Sao Paulo
  Barretto, Oscar deF.

CANADA
Calgary
  Walker, Robert H.
Edmonton
  Huckell, John R.
Kingston
  Taguchi, Kenneth
Kitchener
  Tallon, John B.
Lancaster
  Gregory, Robert A.
London
  Cameron, Howard S.
  Sober, Stanley
Montreal
  Devanloo, Habibolah
  Greenwood, Frederick A.H.
  Hogg, James C.
  Johnson, Louis G.
  Kahn, David S.
  Shugar, Joseph L.
Nova Scotia
  Marshall, Clyde S.
Olds
  Burland, George R.
Ottawa
  DesGroseilliers, Jean-Pierre
Rexdale
  Breisman, John J.
St. Johns
  Holt, Charles L.
Scarsborough
  Melvin, William J.S.
Sherbrooke
  Merminod, Andre E.
Sudbury
  Field, Paul
Toronto
  Cooper, Joel D.
  Froese, Alison B.D.
  Gardiner, William J.
  Goresky, Gerlad V.
  Harris, W. Robert
  Holmes, R. Brian
  Johnson, Allen C.
  McIlroy, William J.
  Ritchie, Alexander C.
  Sellers, Edward M.
  Shiffman, Norman J.
  Simone, Andrew A.
Vancouver
  Bell, Michael H.
  Clement, Philip B.
  Dunn, William L.
West Hamilton
  Detwiler, Robert C.
Westmount
  Wexler, Marvin J.
Winnipeg
  Adamson, Gilbert L.
  Carmona, Robert A.
  Thurlbeck, Wiliam M.

CHILE
Santiago
  Williamson-Lefort, Ladislao

COLUMBIA
Bogota
Salamanca, Juan J.
Saravia, Rafael

DENMARK
Aarhus C.
Overgaard, Jens
Ovegaard, Marie
Copenhagen
Ibsen, Bjorn
Probst, Jan-Henrik
Hellerup
Anderson, Erik W.

ENGLAND
Birmingham
Trethowan, William H.
Hampshire
Ogus, Hugh
Kenton
MacLellan, Gordon E.
London
Birnbaum, Howard W.
El Nahas, Abdel M.
Fox, Lowell E.
Hallett, Mark
Kennedy, John H.
Leigh, A. Denis
Lipson, Stephen J.
Parsons, John Anthony
Raff, Martin C.
Yates, Colin
Menston
Gore, Charles P.
Middlesex
Norris, Stephen H.
Notts
Allen, Terence R.
Oxford
Cohan, Benjamin E.
Morris, Peter J.
Sheffield
Russell, Robert G.

FRANCE
Lyon
Michael, Albert J.D.
Paris
Kernan, Reginald D.
Strasbourg
Koch-Weser, Jan

GERMANY
Dusseldorf
Von Pohl, Joachim W.
Hamburg
Mueller, Egbert Hl
Munich
Harder, Hans J.
Huppe, Justin R.
Pinnell, Sheldon R.

GREECE
Athens
Arzimanoglu, Anthony A.
Kapellakis, George Z.
Zaoussis, Alexander L.

GUATEMALA
Guatemala City
Fuchs, Pablo
Herrera, Rudolfe El
Sosa, Dagoberto
Toriello, Julio

HAITI
Port-au-Prince
May, Harold L.

HOLLAND
Amsterdam
Donner, Reynout

ICELAND
Reykjavik
Halldorsson, Thorlakur S.
Hallgrimsson, Jonas
Kristjansson, Haukur

INDIA
Bombay
Rebello, Desire J.A.
Yodh, Shyam B.
Calcutta
Hughes, James R.
Ludhiana
Wysham, Donald N.
New Delhi
Pant, Shyam S.
Singh, Madan M.
Tandon, Rajendra

INDONESIA
Jog Jakarta
Parson, William

IRAN
Shiraz
Barekat, Ali A.
Esmaili, Mohammad H.
Tehran
Saidi, Farrokh
Samity, Hussein E.

IRELAND
Ballina
Loftus, James G.
Belfast
Johnston, Hilary
Dublin
Dervan, Peter A.
Guiney, Edward J.

ISRAEL
Haifa
Hemli, Jesaiachu A.
Jerusalem
Caplan, Gerald
Rosenbaum, Milton
Petah Tiqua
Laron, Zvi
Tel-Aviv
Geller, Eran
Heilbronn, Yechiel D.

ITALY
Milano-Affori
Mangoni, Alfonso

JAPAN
Tokyo
Hoshi, Motonori
Kugimiya, Toyoki
Yokoyama, Mitsou M.
Yoshikawa, Hideyasu

LEBANON
Beirut
Kirkwood, Samuel B.

MEXICO
Aguascalientes
Ramirez-Acosta, Javier A.
Ensenada
Freeman, Norman E.
Mexico City
Chavez-Peon, Federico
Santacruz, Abraham M.

NETHERLANDS
Rotterdam
Vanroonhoven, Theo. J.

NEW ZEALAND
Dunedin
Blennerhassett, John B.
Ragsdale, Bruce C.

NIGERIA
Aba
Onwukwe, Mba Felix
Logos
Baldwin, Wayne E.

REPUBLIC OF PANAMA
Panama
Suescum, Alfredo T.

PARAGUAY
Asuncion
Aquino, Telmo M.

PERU
Lima
deMola, Luis L.

PHILIPPINES
Davao City
Calderon, Doninador C.
Manila
Canalas, Benjamin D., Jr.
Quezon City
Bautista, Florosa A.

POLAND
Warsaw
Kacki, Janusz F.

PUERTO RICO
Cieba
Ring, Ernest J.

REPUBLIC OF THE CONGO
Zaire
Cardenal, Fernando

SAUDI ARABIA
Jiddah
Mull, J. Dennis

SCOTLAND
Glasgow
Hurt, R. Wayne
Mital, Mohinder A.

SOUTH AFRICA
Johannesburg
Saffer, S. David

SWEDEN
Lund
Thomason, Dick A.

SWITZERLAND
Basel
Hugin, Werner
Flawil
Seiler, Rolf W.
Geneva
Mach, Bernard F.
Muller, Alex T.
Muller, Walter A.
Lausanne
Cable, William J.

TAIWAN
Taipei
Kao, Ming C.

THAILAND
Bangkok
Stewart, Michael M.
Sujatanond, Manit

TURKEY
Istanbul
Yenel, Faruk M.

UGANDA
Kampala
Kanverezi, Bwogi R.

VENEZUELA
Caracas
Vaisman, Isaac
Maracaibo
Solis, Oscar J.

VIRGIN ISLANDS
St. Thomas
Howard, Fred H.

YUGOSLAVIA
Belgrade
Petrovich, George
Zagreb
Milas, Luka

PLANNED GIVING
WILLS AND BEQUESTS

The founding of the Massachusetts General Hospital in 1811 and its notable service over the succeeding years have been made possible in large part by generous gifts and bequests. Now, in addition, planned giving arrangements, including the give annuity, the charitable remainder unitrust, the charitable remainder annuity trust, and the pooled income fund, are available—and are being used—to the mutual benefit of donors and the hospital.

Funds may be left by will to the Massachusetts General Hospital in one or more of the following ways:

A cash bequest leaves a specific dollar amount.

A bequest of all or a stated percentage of the residue of an estate gives the hospital all or such stated percentage of the balance of the estate after payment of debts, taxes, expenses of administration, and specific bequests.

A bequest of a remainder of a charitable remainder trust after a life estate in a surviving spouse or other beneficiary(ies) gives the hospital all or a portion of the principal sum of such trust following the death of the spouse or other life beneficiary(ies).

A contingent bequest makes the hospital the beneficiary only in the event that other designated beneficiaries fail to survive the donor.

Should you plan to include the hospital in your will—or should you be interested in one of the types of gifts described above—the hospital could suggest to you or your lawyer specific wording for carrying out your wishes.

Joseph C. Donnelly, Jr., Director of Development (telephone: 726-2200), would be pleased to hear from you and to provide whatever information you or your lawyer may seek.